08/12/2011 12:53

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FEC FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 07 0 1 2011 07 3 1 2011 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 08 12 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS Page 2

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

D " D 07 0 1 2011 07 3 1 2011 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011[°] 1836473.19 January 1 (b) Cash on Hand at 2344330.82 Begining of Reporting Period 114474.56 1083239.91 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 2458805.38 2919713.10 6(a) and 6(c) for Column B) 63390.72 524298.44 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 2395414.66 2395414.66 (subtract Line 7 from Line 6(d))

9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)

0.00

10. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)

0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

м м 0 7

From:

^D 0 1

2011

To:

м°м 0 7 D D 3 1

Y Y Y Y 2 0 1 1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	61341.33	442574.80
(ii) Unitemized	32277.62	138326.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)	93618.95	580901.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees(such as PACs)(d) Total Contributions (add Lines	0.00	5000.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	93618.95	585901.64
Transfers From Affiliated/Other Party Committees	20600.00	489275.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	1334.52
Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5500.00
7. Other Federal Receipts (Dividends, Interest, etc.)	255.61	1228.75
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	114474.56	1083239.91
. Total Federal Receipts (subtract Line 18(c) from Line 19)	114474.56	1083239.91

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	or disbursements	Page 4
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal		Tanana I our to Buto
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	140.72	3298.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	140.72	3298.44
Transfers to Affiliated/Other Party	0.00	0.00
Committees		
and Other Political Committees	63000.00	520750.00
(use Schedule E)	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	250.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	250.00	250.00
9. Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22,	63390.72	524298.44
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	00090.12	324230.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	63390.72	524298.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	93618.95	585901.64
34.	Total Contribution Refunds (from Line 28(d))	250.00	250.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	93368.95	585651.64
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	140.72	3298.44
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1334.52
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	140.72	1963.92

FE6AN026

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Arthur A Ushijima Mailing Address 1099 Alakea Street, Si City Honolulu FEC ID number of contributing federal political committee. Name of Employer Queen's Health Systems	State Zip Code HI 96813-4512 C Occupation	Date of Receipt M M / D D / Y Y Y Y Y O 7 0 1 2 0 1 1 Transaction ID: 19233626 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify)	President and Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey A Powelson Mailing Address Hickory Corner Road Route 4, Box 96 City Philippi FEC ID number of contributing federal political committee. Name of Employer Broaddus Hospital Receipt For: Primary General Other (specify)	State Zip Code WV 26416-9536 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 19249201 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Thomas O. Barnes Mailing Address 1900 Perkins St. City Bristol FEC ID number of contributing federal political committee. Name of Employer Connecticut Children's Medical Center Receipt For: Primary General Other (specify)	State Zip Code CT 06010-8924 C Occupation Trustee Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	1000.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan Mailing Address 283 Gallopiny Hill R City	oad State Zip Code	Date of Receipt 0 7 0 5 2 0 1 1 Transaction ID: 19249229
Hopkinton FEC ID number of contributing federal political committee.	NH 03229-3402	Amount of Each Receipt this Period 14.50
Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation V.P., Finance and Rural Hospitals Aggregate Year-to-Date ▼ 219.50	
Full Name (Last, First, Middle Initial) Mr. Stephen M. Ahnen Mailing Address 125 Airport Road		Date of Receipt 0 7 0 5 2 0 1 1
City	State Zip Code	Transaction ID: 19249230
Concord FEC ID number of contributing federal political committee.	NH 03301-7300	Amount of Each Receipt this Period 41.64
Name of Employer New Hampshire Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and CEO Aggregate Year-to-Date 625.24	
Full Name (Last, First, Middle Initial) Mr. Mark D Judy		Date of Receipt
Mailing Address 817 Commercial Str	eet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Leavenworth	State Zip Code WA 98826-1316	Transaction ID: 19249243 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cascade Medical Center	Occupation Administrator and Chief Executive Of	 fi
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	·	306.14

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 107 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any persor he name and address of any political committee to s	13 14 15 16 n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) Ms. Kathleen Paul		Date of Receipt
Mailing Address P O Box 900		07 01 7 2011
City	State Zip Code	Transaction ID: 19249244
Seattle FEC ID number of contributing federal political committee.	WA 98111-0900	Amount of Each Receipt this Period 250.00
Name of Employer Virginia Mason Medical Ce- nter	Occupation Vice President Communications and F	- Publ
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Syd Bersante		Date of Receipt
Mailing Address P O Box 2197		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19249245
Tacoma	WA 98401-2197	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Joseph Medical Center	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. C Scott Bond		Date of Receipt
Mailing Address 300 Elliott Avenue V	/est, Suite 300	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: 19249246
Seattle	WA 98119-4122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Washington State Hospital Association	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Ss. (opss.// •		
		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Scott W Bosch Mailing Address 2520 Cherry Avenue City Bremerton FEC ID number of contributing federal political committee. Name of Employer Harrison Medical Center Receipt For: Primary General	State Zip Code WA 98310-4270 C Occupation President and Chief Executive Office Aggregate Year-to-Date	Date of Receipt 0 7 0 1 2 0 1 1 Transaction ID: 19249251 Amount of Each Receipt this Period 500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Diane E. Cecchettini, RN, MS Mailing Address 12709 54th Avenue, N City Gig Harbor FEC ID number of contributing federal political committee.	State Zip Code WA 98332-8853	Date of Receipt M M M / D D / Y Y Y Y Y O 7 2 0 1 1 Transaction ID: 19249252 Amount of Each Receipt this Period 500.00
Name of Employer MultiCare Health System Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Sarah Patterson	Occupation President and Chief Executive Office Aggregate Year-to-Date 500.00	Date of Receipt
Mailing Address P O Box 900 City Seattle FEC ID number of contributing federal political committee.	State Zip Code WA 98111-0900	Transaction ID: 19249253 Amount of Each Receipt this Period 500.00
Name of Employer Virginia Mason Medical Center Receipt For: Primary General Other (specify)	Occupation President and Chief Operating Office Aggregate Year-to-Date 500.00	er
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joseph W. Wilczek Mailing Address 1175 SW 296th Street City	t State Zip Code	Date of Receipt M M
Federal Way FEC ID number of contributing federal political committee.	WA 98023-8251	Amount of Each Receipt this Period 500.00
Name of Employer Franciscan Health System Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Ms. Nancy Steiger Mailing Address 2901 Squalicum Parky	way	Date of Receipt 0 7 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19249255
Bellingham	WA 98225-1851	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer PeaceHealth St. Joseph Ho- spital Receipt For:	Occupation Regional Chief Executive Officer and Aggregate Year-to-Date	1 C
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Anthony J Cimino		Date of Receipt
Mailing Address 4 Terry Court		07 08 7 2011
City Hamilton	State Zip Code NJ 08620-9796	Transaction ID: 19249313 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Robert Wood Johnson Unive- rsity Hospita	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
		1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Α)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins			Date of Receipt
Mailing Address 6180 Lower Mounta	ain Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New Hope	State PA	Zip Code 18938-5760	Transaction ID: 19249329 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10330-3700	5.00
Name of Employer New Jersey Hospital Association Receipt For:	 	n Health Economics • Year-to-Date ▼	
Primary General Other (specify) ▼		222.93	
Full Name (Last, First, Middle Initial) Mr. Richard J Kathrins	<u> </u>		Date of Receipt
Mailing Address 1442 Saurigvon Dr	07 08 2011		
City	State	Zip Code	Transaction ID: 19249330
Toms River	NJ	08753	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Bacharach Institute for Rehabilitation	Occupation Presiden	n t and Chief Executive Office	_ r
Receipt For:	, '	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Mr. Steven G Littleson			Date of Receipt
Mailing Address 55 Fairhaven Road	I		07 08 2011
City Fair Haven	State NJ	Zip Code 07704-3305	Transaction ID: 19249337
FEC ID number of contributing federal political committee.	C	07704-0000	Amount of Each Receipt this Period
Name of Employer Meridian Health	Occupation Presiden		7
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 107 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any po- name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Fredrick K Slunecka		Date of Receipt
	Mailing Address 3900 West Avera Driv	e, Suite 301	07 06 7 2011
	City	State Zip Code SD 57108-5721	Transaction ID: 19249549
	Sioux Falls FEC ID number of contributing federal political committee.	SD 57108-5721	Amount of Each Receipt this Period 250.00
	Name of Employer Avera Health	Occupation Chief Operating Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 425.00	
3.	Full Name (Last, First, Middle Initial) Mr. David R Hewett Mailing Address 3708 West Brooks Pla	oo Suito 1	Date of Receipt
		ce, Suite i	07 06 2011
	City Sioux Falls	State Zip Code SD 57106-4207	Transaction ID: 19249551
	FEC ID number of contributing federal political committee.	C 37100-4207	Amount of Each Receipt this Period 500.00
	Name of Employer South Dakota Association of Healthcare	Occupation President & Chief Executive Office	er
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
. -	Full Name (Last, First, Middle Initial) Mr. Gale N Walker		Date of Receipt
	Mailing Address 401 West Glynn Drive		07 06 2011
	City	State Zip Code	Transaction ID: 19249567
	Parkston FEC ID number of contributing federal political committee.	SD 57366-9605	Amount of Each Receipt this Period 250.00
	Name of Employer Avera St. Benedict Health Center	Occupation President and Chief Executive Offi	icer
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Γ	SUBTOTAL of Receipts This Page (ontional)		1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persor go the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Kelby K Krabbenhoft Mailing Address PO Box 5039 City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Sanford Health Receipt For: Primary General Other (specify)	State Zip Code SD 57117-5039 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 0 6 2 0 1 1 Transaction ID: 19249717 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Ms. Deb Fischer-Clemens Mailing Address 3217 W Zephyr Pl City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Avera Health Receipt For: Primary General Other (specify)	State Zip Code SD 57108-5721 C Occupation Vice President Center for Public Polic Aggregate Year-to-Date 425.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Ms. Cindy Morrison Mailing Address PO Box 5039 City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Sanford Health Receipt For: Primary General Other (specify)	State Zip Code SD 57117-5039 C Occupation Senior Vice President for Public Polic Aggregate Year-to-Date 250.00	Date of Receipt O 7 O 6 Z 0 1 1 Transaction ID: 19249875 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (option	nal)	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		a coo or any pointed committee to	
Full Name (Last, First, Middle Initial) Ms. Pamela J Rezac			Date of Receipt
	Mailing Address 501 Summit Avenue		
City Yankton	State SD	Zip Code 57078-3855	0 7 0 6 2 0 1 1 Transaction ID: 19249882
FEC ID number of contributing federal political committee.	C	37070-3633	Amount of Each Receipt this Period 250.00
Name of Employer Avera Sacred Heart Hospit- al	Occupation Regional	n President	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Mary C. Becker	 		Date of Receipt
Mailing Address 7800 South Eagle R	load		0 7 0 6 2 0 1 1
Calumbia	State MO	Zip Code	Transaction ID: 19250240
Columbia FEC ID number of contributing federal political committee.	C	65203-9017	Amount of Each Receipt this Period 43.75
Name of Employer Missouri Hospital Associa- tion	Occupation Senior V	n P, Commc. & Health Improve	ement
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 262.50	
Full Name (Last, First, Middle Initial) Mr. Arthur A Ushijima			Date of Receipt
Mailing Address 1099 Alakea Street,	Suite 1100		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Honolulu	State HI	Zip Code 96813-4512	Transaction ID: 19250241
FEC ID number of contributing federal political committee.	C	90010-4312	Amount of Each Receipt this Period 250.00
Name of Employer Queen's Health Systems	Occupation Presiden	n t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		543.75

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any p name and address of any political committe	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Herb B. Kuhn		Date of Receipt
Mailing Address 5310 Saddlebrooke Lar	ne	0 7 0 6 2 0 1 1
City	State Zip Code	Transaction ID: 19250252
Lohman	MO 65053-9353	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Missouri Hospital Associa-	Occupation	
tion	President and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon		Date of Receipt
Mailing Address 1811 Forest Park Court		0 7 0 6 2 0 1 1
City	State Zip Code	Transaction ID: 19250253
Jefferson City	MO 65109-9782	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.50
Name of Employer Missouri Hospital Associa- tion	Occupation Sr. Vice President, Governmental	Relat
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff		Date of Receipt
Mailing Address 5119 Coventry Waye		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19250259
Jefferson City	MO 65101-8284	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43.75
Name of Employer Missouri Hospital Associa- tion	Occupation Senior Vice President & CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50	
SUBTOTAL of Receipts This Page (optional)		231.25

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for each cat	te schedule(s) egory of the mmary Page	FOR LINE NUMBER: PAGE 16 / 107 (check only one) X
Ar	y information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or name and address of any pol	used by any perso litical committee to	
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Mr. Jerry M. Sill			Date of Receipt
	Mailing Address 2906 Valley View Terr	ace		07 06 7 2011
	City	State Zip Code		Transaction ID: 19250262
	Jefferson City	MO 65109-10	69	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		43.75
	Name of Employer Missouri Hospital Associa-	Occupation Senior Vice President	& General Cour	nse
	tion Receipt For:	Aggregate Year-to-Date		
	Primary General Other (specify)	riggiogate roal to Date	262.50	
	Full Name (Last, First, Middle Initial)	0 0 0 0 0	0 0 0 0	
	Ms. Stacy Barstad			Date of Receipt
	Mailing Address 251 Fifth Street East			07 06 7 2011
	City	State Zip Code		Transaction ID: 19250266
	Tracy	MN 56175-15	36	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		135.00
	Name of Employer Sanford Tracy Medical Cen- ter	Occupation Administrator		
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General		1 1 1 1	
	Other (specify) ▼	0 0 0 0 0	349.00	
	Full Name (Last, First, Middle Initial) Ms. Sara J Criger			Date of Receipt
	Mailing Address 45 West 10th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 19250267
	Saint Paul	MN 55102-10	62	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1	250.00
	Name of Employer St. Joseph's Hospital	Occupation Chief Executive Office	er	
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼		250.00	
				428.75

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A.	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Timothy H Hanson	name and ad	dress of any political committee to	solicit contributions from such committee. Date of Receipt
	Mailing Address 559 Capitol Boulevard,	6-South		07 06 YYYYY 2011
	City	State	Zip Code	Transaction ID: 19250268
	Saint Paul FEC ID number of contributing federal political committee.	C	55103-0000	Amount of Each Receipt this Period 250.00
	Name of Employer HealthEast Care System Receipt For: Primary General Other (specify) ▼		t and Chief Executive Officer e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Ms. Kristin Loncorich Mailing Address 2550 University Avenue	e W.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Suite 350-S	State	Zip Code	Transaction ID: 19250271
	Saint Paul	MN	55114-1907	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Minnesota Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n of State Government Relation e Year-to-Date ▼ 250.00	ns
с. С.	Full Name (Last, First, Middle Initial) Dr Jeff Peterson, MD Mailing Address 201 9th Street West			Date of Receipt
	City Ada	State MN	Zip Code 56510-1279	Transaction ID: 19250272 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Essentia Health Ada	Occupation Chief of		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		·····	750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 107 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) American Hospital Association P.	and Statements may not be sold or used by any persoring the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Don Adams Mailing Address 419 Natural Resc	urces Drive	Date of Receipt
City <u>Little Rock</u> FEC ID number of contributing	State Zip Code AR 72205-1576	Transaction ID: 19250284 Amount of Each Receipt this Period
Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify)	Occupation Vice President, Rural & Mental Health Aggregate Year-to-Date 500.00	500.00
Full Name (Last, First, Middle Initial) Ms. Tina Creel Mailing Address 419 Natural Reso	urces Drive	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19250285
Little Rock	AR 72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Paul Cunningham	'	Date of Receipt
Mailing Address 419 Natural Reso	urces Drive	07 08 YYYY 2011
City	State Zip Code	Transaction ID: 19250286
Little Rock FEC ID number of contributing federal political committee.	AR 72205-1576	Amount of Each Receipt this Period 500.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	nal)	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements ma	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. America S. Farrell Mailing Address P O Box 1998			Date of Receipt
City	State	Zip Code	0 7 0 8 2 0 1 1 Transaction ID: 19250287
El Dorado	AR	71731-1998	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Medical Center of South Arkansas	Occupatio Chief Ex	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Christina Hockaday			Date of Receipt
Mailing Address 4 Hospital Drive			07 / 08 / 2011
City <u>Morrilton</u>	State AR	Zip Code 72110-4510	Transaction ID: 19250288 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		350.00
Name of Employer St. Vincent Morrilton	Occupation Chief Ex	n ecutive Officer and Administr	ra
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Beth Ingram			Date of Receipt
Mailing Address 419 Natural Resources I	Drive		07 08 7 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 19250289
Little Rock	AR	72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Arkansas Hospital Associa- tion	Occupatio VP, Educ	n cational & Membership Servi	ces
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			1350.00
TOTAL This Period (last page this line number or		·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any per name and address of any political committee	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Walter E Johnson, Jr.		Date of Receipt
Mailing Address 1600 West 40th Avenu	ie .	07 08 2011
City	State Zip Code	Transaction ID: 19250290
Pine Bluff	AR 71603-7089	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Jefferson Regional Medical	Occupation	
Center	President and Chief Executive Office	cer
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Raymond W Montgomery, II	1	Date of Receipt
Mailing Address 3214 East Race Avenu	le	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19250291
Searcy	AR 72143-4810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer White County Medical Cent- er	Occupation President and Chief Executive Office	per
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr Robert Ryall		Date of Receipt
Mailing Address 419 Natural Resources	s Drive	07 08 2011
City	State Zip Code	Transaction ID: 19250292
Little Rock	AR 72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Arkansas Hospital Associa- tion	Occupation President and Chief Executive Office	cer
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)	I	2350.00

Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Jodiane Tritt Mailing Address 419 Natural Resources City Little Rock FEC ID number of contributing federal political committee.	statements may not be sold or used by any person rname and address of any political committee to so any political committee to	for the purpose of soliciting contributions olicit contributions from such committee. Date of Receipt 0 7 0 8 2 0 1 1 Transaction ID: 19250293
Ms. Jodiane Tritt Mailing Address 419 Natural Resource: City Little Rock FEC ID number of contributing	State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Little Rock</u> FEC ID number of contributing	State Zip Code	07 08 2011
FEC ID number of contributing	AR 72205-1576	
	C	Amount of Each Receipt this Period 1000.00
Name of Employer Arkansas Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President for Government Relation Aggregate Year-to-Date 1000.00	m
Full Name (Last, First, Middle Initial) Ms. Elisa M. White Mailing Address 419 Natural Resources	s Drive	Date of Receipt 0 7 0 8 2 0 1 1
City	State Zip Code	Transaction ID: 19250294
Little Rock FEC ID number of contributing federal political committee.	AR 72205-1576	Amount of Each Receipt this Period 500.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Vice President & General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Beth Berry	<u> </u>	Date of Receipt
Mailing Address 500 Interstate Bouleva	rd South	07 08 2011
City	State Zip Code	Transaction ID: 19250379
Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 300.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Sr. Vice President, Government Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	······	1800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persore name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Terrance Bridges		Date of Receipt
Mailing Address One Park Plaza Building 1, 1-E		07 08 7 2011
City Nashville	State Zip Code TN 37203-6527	Transaction ID: 19250380 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer HCA - Hospital Corporation of America Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President, Behavioral Health Servagregate Year-to-Date ▼ 350.00	v
Full Name (Last, First, Middle Initial) Mr. Michael A. Dietrich Mailing Address 500 Interstate Bouleva	ard South	Date of Receipt
		07 08 2011
City Nashville	State Zip Code TN 37210-4634	Transaction ID: 19250381 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	166.64
Name of Employer Tennessee Hospital Associ- ation	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Keith D Goodwin		Date of Receipt
Mailing Address P O Box 15010		07 08 YYYY 2011
City Knoxville	State Zip Code TN 37901-5010	Transaction ID: 19250382 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 37901-3010	1000.00
Name of Employer East Tennessee Children's Hospital Receipt For:	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional) .		1516.64
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 107 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	13 14 15 16 n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG		
Full Name (Last, First, Middle Initial) Mr. Michael Huggins		Date of Receipt
Mailing Address 500 Interstate Bould		07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19250383
<u>Nashville</u>	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	333.32
Name of Employer Tennessee Hospital Associ- ation	Occupation Executive Vice President & COO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ms. Jill Talbert		Date of Receipt
Mailing Address 500 Interstate Bould	evard South	07 08 YYYYY 07 08 2011
City	State Zip Code	Transaction ID: 19250384
<u>Nashville</u>	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	166.64
Name of Employer Tennessee Hospital Associ-	Occupation Director of Advocacy and Grassroots	
<u>ation</u> Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mrs. Bernice C. Ulrich		Date of Receipt
Mailing Address 4655 Running Broo	k Terrace	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19250397
Greenwood	IN 46143-9255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Indiana Hospital Associat- ion	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
	d)	749.96

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11			
Any information copied from such Report or for commercial purposes, other than us	s and Statements may not be sold or used by any persor sing the name and address of any political committee to s	n for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC				
Full Name (Last, First, Middle Initial) Mr. Paul L Usher		Date of Receipt			
Mailing Address 441 North Waba	ash Avenue	0 7			
City	State Zip Code	Transaction ID: 19250398			
<u>Marion</u>	IN 46952-2612	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer Marion General Hospital	Occupation President and Chief Executive Officer				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
Full Name (Last, First, Middle Initial) Mr. Paul Andrews		Date of Receipt			
Mailing Address 41 Highland Ave					
City	State Zip Code	Transaction ID: 19250401			
Winchester	MA 01890-1446	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	262.50			
Name of Employer Winchester Hospital	Occupation Chairman				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50				
Full Name (Last, First, Middle Initial) Mr. David H. Holt, Jr.		Date of Receipt			
Mailing Address 310 stephen Kin	g Dr	07			
City	State Zip Code	Transaction ID: 19250853			
Anderson	SC 29621-2462	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer AnMed Health	Occupation Radiation Safety Officer				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
SUBTOTAL of Receipts This Page (opti	ional)	762.50			

				_	
(SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 107	
	ITEMIZED RECEIPTS		for each category of the	(check only one)	
11			Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17	
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
	American Hospital Association PAC				
∠ A.	Full Name (Last, First, Middle Initial) Mr. Jerry A Parrish			Date of Receipt	
	Mailing Address 800 North Fant Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 19250862	
	Anderson	SC	29621-5708	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer AnMed Health	Occupation Vice Pre-			
	Receipt For:		e Year-to-Date	+	
	Primary General	Aygregate	e rear-to-bate v	1	
	Other (specify) ▼	0 0	250.00		
- В.	Full Name (Last, First, Middle Initial) Mr. Richard Kirk Toomey	<u> </u>		Date of Receipt	
υ.		Mailing Address 955 Ribaut Road			
	City	State	Zip Code	07 11 2050000	
	Beaufort	SC	•	Transaction ID: 19250863	
	beautort	30	29902-5441	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Beaufort Memorial Hospital	Occupation	n t and Chief Executive Officer	_	
	Receipt For:		e Year-to-Date		
	Primary General	Aygregate	e rear-to-bate •	1	
	Other (specify) ▼	0 0	500.00		
- С.	Full Name (Last, First, Middle Initial) Mr. Daniel Duggan	I		Date of Receipt	
	Mailing Address 330 Henderson Rd			M M / D D / Y Y Y Y Y O D D 2 0 1 1	
	City	State	Zip Code	Transaction ID: 19250864	
	Greenville	SC	29607-3346	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Bon Secours St. Francis Hospital	Occupation Chief Op	n perating Officer		
	Receipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼	39.39	250.00		
Γ	CURTOTAL of December This December 11			1000.00	
L	SUBTOTAL of Receipts This Page (optional)		······		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Liz Keith		Date of Receipt
Mailing Address 2 Deer Spring Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19250865
Simpsonville	SC 29680-6516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bon Secours St. Francis Health System	Occupation Senior Vice President-Mission	<u> </u> -
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Mark S Nantz		Date of Receipt
Mailing Address One St Francis Drive		07 11 2011
City	State Zip Code	Transaction ID: 19250949
Greenville	SC 29601-3999	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bon Secours St. Francis Health System	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Ronnie Hyatt	.L	Date of Receipt
Mailing Address One St Francis Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19250950
Greenville	SC 29601-3207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bon Secours St. Francis Health System	Occupation Senior Vice President Finance and Chi	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 107 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	η not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Teri Ficicchy			Date of Receipt
Mailing Address 3000 St Matthews F	Road State	Zip Code	0 7 1 1 2 0 1 1 Transaction ID: 19250951
<u>Orangeburg</u>	SC	29118-1496	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	201101100	250.00
Name of Employer Regional Medical Center	Occupation Vice Pres	n sident, Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Gayle Resetar Mailing Address Post Office Drawer	1718		Date of Receipt
011	01-1-	7'- O-d-	07 11 2011
City <u>Georgetown</u>	State SC	Zip Code 29442	Transaction ID: 19250952
FEC ID number of contributing federal political committee.	C	29442	Amount of Each Receipt this Period 250.00
Name of Employer Georgetown Memorial Hospi- tal	Occupation Chief Op	n erating Officer	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Richard E D'Alberto			Date of Receipt
Mailing Address P O Box 976			07
City	State	Zip Code	Transaction ID: 19250953
Clinton	SC	29325-0976	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Laurens County Health Care System		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 107 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Charles D Beaman, Jr Mailing Address P O Box 2266 City Columbia FEC ID number of contributing federal political committee. Name of Employer Palmetto Health Receipt For: Primary General	State Zip Code SC 29202-2266 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt 0 7 1 1 2 0 1 1 Transaction ID: 19250983 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Julian Gibbons Mailing Address Five Medical Park Dri	250.00 ve	Date of Receipt
City	State Zip Code	0 7 1 1 2 0 1 1 Transaction ID: 19250984
Columbia FEC ID number of contributing federal political committee.	SC 29203	Amount of Each Receipt this Period 250.00
Name of Employer Palmetto Health Receipt For: Primary General Other (specify) ▼	Occupation Vice President / Community & Government Aggregate Year-to-Date 250.00	rnmen
Full Name (Last, First, Middle Initial) Mr. James M Bridges	1	Date of Receipt
Mailing Address Taylor at Marion Stree	et	M M / D D / Y Y Y Y Y Y 1 1 1 2 0 1 1
City <u>Columbia</u>	State Zip Code SC 29220-0001	Transaction ID: 19250985 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Palmetto Health Baptist	Occupation Executive Vice President and Chief (Dpę
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	•	<u> </u>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John J Singerling, III Mailing Address P O Box 2266 City Columbia FEC ID number of contributing federal political committee. Name of Employer Palmetto Health Receipt For: Primary General Other (specify)	State Zip Code SC 29202-2266 C Occupation President Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 1 1 2 0 1 1 Transaction ID: 19250986 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Allen P Carroll Mailing Address 2095 Henry Tecklenbu City Charleston FEC ID number of contributing federal political committee. Name of Employer Bon Secours St. Francis Hospital Receipt For: Primary General Other (specify)	State Zip Code SC 29414-5733 C Occupation Senior Vice President and Chief Execution Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y O 7 1 1 2 0 1 1 Transaction ID: 19250995 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Bret Johnson Mailing Address 316 Calhoun Street City Charleston FEC ID number of contributing federal political committee. Name of Employer Roper Hospital Receipt For: Primary General Other (specify)	State Zip Code SC 29401-1113 C Occupation Chief Financial Officer Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persol ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
A .	Full Name (Last, First, Middle Initial) Ms. Diana Topjian, MSN, CCRN			Date of Receipt
	Mailing Address 632 Stoneboro Ct			07 11 2011
	City <u>Charleston</u>	State SC	Zip Code 29412-2760	Transaction ID: 19250997 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Roper Hospital	Occupation Vice Pres	n ident /Chief Nursing Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
– В.	Full Name (Last, First, Middle Initial) Mr. Doug Harrison			Date of Receipt
	Mailing Address 1574 Fiddlers Marsh [Orive		07 11 2011
	City	State SC	Zip Code	Transaction ID: 19250998
	Mt Pleasant FEC ID number of contributing federal political committee.	C	29464-4286	Amount of Each Receipt this Period 250.00
	Name of Employer Roper Hospital	Occupation Vice Pres	ident, Human Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Douglas Bowling			Date of Receipt
	Mailing Address 2509 Watercrest Lane)		M M / D D / Y Y Y Y Y O T 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: 19250999
	Johns Island FEC ID number of contributing federal political committee.	SC C	29455-3108	Amount of Each Receipt this Period 500.00
	Name of Employer Roper Hospital	Occupation Vice Pres	n ident of System Developme	ent
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC F ITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other	than using the name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Final American Hospital Associ	•		
Full Name (Last, First, Middle I Ms. Ellen Jackson Brown Mailing Address 316 Calho			Date of Receipt
	un Street		07 11 2011
City	State	Zip Code	Transaction ID: 19251001
Charleston	SC	29401-1113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Roper Hospital	Occupation VP, Man	ⁿ aged Care & Physician Serv	rices
Receipt For:		e Year-to-Date ▼	
Primary Genera Other (specify) ▼		250.00	
Full Name (Last, First, Middle I Mr. Greg Edwards	nitial)		Date of Receipt
Mailing Address 316 Calho	un Street		07 11 2011
City	State	Zip Code	Transaction ID: 19251002
Charleston	SC	29401-1113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Roper Hospital	Occupation Vice Pre	ⁿ sident and General Counsel	
Receipt For:		e Year-to-Date ▼	_
Primary ☐ General Other (specify) ▼		250.00	
Full Name (Last, First, Middle I Mr. John Sullivan	nitial)		Date of Receipt
Mailing Address 1772 Bella	my Circle		07 / 11 / 2011
City	State	Zip Code	Transaction ID: 19251003
<u>Albemarle</u>	NC	28001-9511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Roper Hospital	 	ecutive Officer	
Receipt For: Primary General		e Year-to-Date ▼	_
Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Pa	ge (optional)		1000.00
TOTAL This Period (last page th		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	С	
Full Name (Last, First, Middle Initial) Ms. Lisa Irvin, RN, MSN, C		Date of Receipt
Mailing Address 316 Calhoun St		07 11 2011
Charleston	State Zip Code SC 29401-1113	Transaction ID: 19251004
Charleston FEC ID number of contributing federal political committee.	SC 29401-1113	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupation Vice President, Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Matthew J Severance		Date of Receipt
Mailing Address 316 Calhoun Stree	pt .	0 7
City	State Zip Code	Transaction ID: 19251005
Charleston	SC 29401-1113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Roper Hospital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Michael Taylor		Date of Receipt
Mailing Address 316 Calhoun Stree	ut .	07 11 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19251006
Charleston	SC 29401-1125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation Chief Information Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	1000.00
	nber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 107 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association P	ing the name and address of any political committee to s	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Pennie L. Peralta, RN, BSN	1.0.	Date of Receipt
Mailing Address 2223 Hunter Cree	ek Drive	07 11 2011
City	State Zip Code	Transaction ID: 19251007
Charleston	SC 29414-6705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation Vice President of Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr Steven D Shapiro, MD	I	Date of Receipt
Mailing Address 316 Calhoun Stre	eet	07 11 2011
City	State Zip Code	Transaction ID: 19251008
Charleston	SC 29401-1113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation Vice President Medical Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Briggs W Andrews		Date of Receipt
Mailing Address P O Box 13727		07
City	State Zip Code	Transaction ID: 19251009
Roanoke	VA 24036-3727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Clinic	Occupation Senior Vice President Legal Services a	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optic	onal)	850.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting of for commercial purposes, other than using the name and address of any political committee to solicit contributions from sulter than using the name and address of any political committee to solicit contributions from sulter than using the name and address of any political committee to solicit contributions from sulters. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Date of Receipt Amount of Each Receipt Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address 207 Springhill Circle City Bedford VA 24523-5458 FEC ID number of contributing feederal political committee. City Bedford VA 24523-5458 FEC ID number of contributing feederal political committee. City Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address 612 Montgomery St City State Zip Code VA 24523-5458 Full Name (Last, First, Middle Initial) Mr. John Platkowski, MD Mailing Address 612 Montgomery St City State Zip Code VA 24060-7221 Fec ID number of contributing feederal political committee. City Blacksburg VA 24060-7221 Amount of Each Receipt Amount of Ea	contributions h committee.
American Hospital Association PAC Full Name (Last, First, Middle Initial) Dr. Ray Wayne Gandee Mailing Address 3271 Allendale St SW City State Zip Code VA 24014-3120 Roanoke FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic Receipt For: Primary General Other (specify) ▼ State Zip Code VA 24014-3120 Amount of Each Receipt Aggregate Year-to-Date ▼ Transaction ID: 1928 Amount of Each Receipt M M M J D D D D D D D D D D D D D D D D	
Dr. Ray Wayne Gandee Mailing Address 3271 Allendale St SW City State Zip Code VA 24014-3120 Fec ID number of contributing federal political committee. Name of Employer Carilion Clinic Receipt For: Primary General Other (specify) ▼ City State Zip Code Primary General Other (specify) ▼ State Zip Code VA 24523-5458 Date of Receipt Amount of Each Receipt Transaction ID: 1925 Amount of Each Receipt Aggregate Year-to-Date ▼ O' 7 13 Transaction ID: 1925 Amount of Each Receipt Date of Receipt Transaction ID: 1925 Amount of Each Receipt Date of Receipt Amount of Each Receipt Date of Receipt Date of Receipt Date of Receipt Amount of Each Receipt Date of Receipt	
City State Zip Code Name of Employer Carilion Clinic Receipt For: Primary General Other (specify) ▼ City State Zip Code VA 24014-3120 Amount of Each Receipt Mailing Address 207 Springhill Circle City State Zip Code VA 24523-5458 FEC ID number of contributing federal political committee. Date of Receipt M M M M M M M M M M M M M M M M M M M	
Roanoke FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Patti Jurkus Mailing Address 207 Springhill Circle City State Zip Code VA 24523-5458 FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ City State Zip Code VA 24523-5458 FEC ID number of contributing federal political committee. Name of Employer Bedford Memorial Hospital President & Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Amount of Each Receipt Transaction ID: 1925 Amount of Each Receipt Transaction ID: 192	2011
FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic Receipt For:	
Receipt For:	350.00
Primary General Other (specify) ▼ 350.00 Full Name (Last, First, Middle Initial) Ms. Patti Jurkus Mailing Address 207 Springhill Circle City State Zip Code PEC ID number of contributing federal political committee. Name of Employer Bedford Memorial Hospital Primary General Other (specify) ▼ 350.00 Full Name (Last, First, Middle Initial) Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City State Zip Code Aggregate Year-to-Date ▼ 350.00 Date of Receipt M M M J D D D D D D D D D D D D D D D D	
Ms. Patti Jurkus Mailing Address 207 Springhill Circle City State Zip Code Bedford VA 24523-5458 FEC ID number of contributing federal political committee. Name of Employer Bedford Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City State Zip Code WA 24060-7221 Date of Receipt Transaction ID: 1926 Amount of Each Receipt Transaction ID: 1926 Transaction ID: 1926 Transaction ID: 1926 Amount of Each Receipt Transaction ID: 1926 Amount of Each Receipt Transaction ID: 1926 Amount of Each Receipt Amount of Each Receipt Transaction ID: 1926 Amount of Each Receipt Amount of Each Receipt Transaction ID: 1926 Amount of Each Receipt Amount of Each Receipt Transaction ID: 1926 Amount of Each Receipt	
City Bedford VA 24523-5458 FEC ID number of contributing federal political committee. Name of Employer Bedford Memorial Hospital President & Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City Blacksburg State Zip Code Transaction ID: 1925 Amount of Each Rece	
Bedford FEC ID number of contributing federal political committee. Name of Employer Bedford Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City State Zip Code Blacksburg FEC ID number of contributing PRESIDENT STATES Amount of Each Receipt Amount of Each Receipt Date of Receipt Transaction ID: 1925 Amount of Each Receipt Transaction ID: 1925	2011
FEC ID number of contributing federal political committee. Name of Employer Bedford Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City State Zip Code Blacksburg FEC ID number of contributing Occupation President & Chief Executive Officer Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Tansaction ID: 1925 Amount of Each Receipt Amount of Each Receipt Amount of Each Receipt Amount of Each Receipt	
Name of Employer Bedford Memorial Hospital Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City Blacksburg State VA State Zip Code VA 24060-7221 Amount of Each Receipt Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date V Date of Receipt Transaction ID: 1925 Amount of Each Receipt	ot this Period
Receipt For: Primary Other (specify) Mr. John Piatkowski, MD Mailing Address City Blacksburg Figs defit & Chief Executive Officer Aggregate Year-to-Date Aggregate Year-to-Date Total Receipt Aggregate Year-to-Date Aggregate Year-to-Date Total Receipt Date of Receipt Mr. John Piatkowski, MD Date of Receipt Transaction ID: 1925 Amount of Each Receipt VA 24060-7221 Amount of Each Receipt Amou	350.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City State Zip Code Blacksburg VA 24060-7221 Amount of Each Receipt Amount of Each Receipt Amount of Each Receipt Amount of Each Receipt	
Mr. John Piatkowski, MD Mailing Address 612 Montgomery St City State Zip Code Transaction ID: 1925 Blacksburg VA 24060-7221 Amount of Each Rece	
City State Zip Code Transaction ID: 1925 Blacksburg VA 24060-7221 Amount of Each Rece	-
City State Zip Code Transaction ID: 1925 Blacksburg VA 24060-7221 Amount of Each Rece FEC ID number of contributing	2011
FEC ID number of contributing	
	ot this Period
	350.00
Name of Employer Carilion New River Valley Medical Cent Occupation President and Chief Executive Officer	
Receipt For: Aggregate Year-to-Date ▼ Primary General	
Other (specify) ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	
SOBTOTAL of Necepts This rage (optional)	1050.00

A.

В.

C.

COUEDINE A /EEO Form 2V)			FOR LINE NUMBER: PAGE 35 / 107		
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12		
		Detailed Suffillary Fage	13 14 15 16 17		
Any information copied from such Reports and S or for commercial purposes, other than using the	statements mag	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Mr. Gerald Seager			Date of Receipt		
Mailing Address 7509 Mendota Place			07 13 7 2011		
City	State	Zip Code	Transaction ID: 19251017		
Springfield	VA	22150-4123	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		350.00		
Name of Employer Inova Health System	Occupatio Chief Op	n erating Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) Mr. G. Robert Vaughan, Jr.			Date of Receipt		
Mailing Address 1839 Mt. Vernon Road	I		0 7		
City	State	Zip Code	Transaction ID: 19251019		
Roanoke	VA	24015-2906	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		350.00		
Name of Employer Carilion Clinic	Occupatio Vice Pres	n sident Finance			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼		350.00			
Full Name (Last, First, Middle Initial) Dr. Gary R Yates, MD	1		Date of Receipt		
Mailing Address 6015 Poplar Hall Drive)		07 13 YYYY 2011		
City	State	Zip Code	Transaction ID: 19251020		
<u>Norfolk</u>	VA	23502-3819	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		350.00		
Name of Employer Sentara Healthcare	Occupatio Chief Me	n dical Officer			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00			
SUBTOTAL of Receipts This Page (optional)	1		1050.00		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1	
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association Processing American Processing Association Processing American	and Statements may not be sold or used by any person ng the name and address of any political committee to s	Tor the purpose of soliciting contributions solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Mr. Edward C Gambrell, Jr. Mailing Address 163 Hospital Drive	2	Date of Receipt	
·		07 11 2011	
City	State Zip Code GA 30577-6820	Transaction ID: 19251940	
Toccoa FEC ID number of contributing federal political committee.	GA 30577-6820	Amount of Each Receipt this Period 250.00	
Name of Employer Stephens County Hospital	Occupation Administrator		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial)		Data of Bassint	
Mr. Eric P Norwood Mailing Address 450 North Candle	r Street	Date of Receipt 0 7 1 1 2 0 1 1	
City	State Zip Code	Transaction ID: 19251967	
Decatur	GA 30030-2626	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Dekalb Medical Center at Downtown Deca	Occupation President and Chief Executive Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Larry Sanders	I	Date of Receipt	
Mailing Address 707 Center Street	, Suite 400	07 11 2011	
City	State Zip Code	Transaction ID: 19251974	
Columbus	GA 31901-1526	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Columbus Regional Healthc- are System	Occupation Chairman and Chief Executive Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
SUPTOTAL of Descirts This Dags (artis	nal)	750.00	

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 107 (check only one) X 11a 11b 11c 12
Any information copied from such or for commercial purposes, othe	n Reports and Statements ma r than using the name and ac	ay not be sold or used by any pers ddress of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In F American Hospital Assoc	•		
Full Name (Last, First, Middle Stephen Shepherd			Date of Receipt
Mailing Address PO Box 1	052		07
City	State	Zip Code	Transaction ID: 19251976
Statesboro	GA	30459-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Candler County Hospital	Occupation Interim		
Receipt For: Primary Gener Other (specify) ▼		te Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Mr. Ben Underwood	Initial)		Date of Receipt
Mailing Address 2104 Mur	ren Drive		07 11 YYYYY
City	State	Zip Code	Transaction ID: 19251989
<u>Smyrna</u>	GA	30080-6520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.00
Name of Employer Talbott Recovery Campus	Occupati Preside	on nt & Chief Executive Officer	
Receipt For: Primary Gener Other (specify) ▼		te Year-to-Date 220.00	
Full Name (Last, First, Middle Ms. Theresa J. Rogers	Initial)		Date of Receipt
Mailing Address 2644 Jen	nifer Drive		07 18 2011
City <u>Jefferson City</u>	State MO	Zip Code 65101-3997	Transaction ID: 19255636 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Missouri Hospital Associa- tion	Occupati Senior \	on /ice President, Data & Inforr	mat
Receipt For: Primary Gener Other (specify) ▼		te Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Pa	age (optional)		645.00

City Denver CO 80211-5302 FEC ID number of contributing federal political committee. Name of Employer Exempla Healthcare, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Mitchell C Carson Mailing Address P O Box 1659 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ State Zip Code CO 80502-1659 FEC ID number of contributing federal political committee. CO 80502-1659 FEC ID number of contributing federal political committee. Name of Employer Longmont United Hospital President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Cocupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Gerald Cotton Mailing Address 501 Castlewood Blvd City State Zip Code Aggregate Year-to-Date ▼ Date of Receipt No 7 12 2 201 Transaction ID: 19256621 Amount of Each Receipt this Period Transaction ID: 19256621 Amount of Each Receipt this Period Transaction ID: 19256621 Amount of Each Receipt this Period		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Mr. Robert W Laderburger Mailling Address 2420 West 26th Avenue, Suite 100-D City State Zip Code Denver CO 80211-5302 FEC ID number of contributing federal political committee. Name of Employer Exempla Healthcare, Inc. President and Chief Executive Officer Receipt For: Primary General Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 19255641 Amount of Each Receipt his Period Aggregate Year-to-Date ▼ Transaction ID: 19255642 Amount of Each Receipt his Period Date of Receipt Transaction ID: 19255642 Amount of Each Receipt his Period Transaction ID: 19256642 Amount of Each Receipt his Period Date of Receipt Transaction ID: 19256642 Amount of Each Receipt his Period President and Chief Executive Officer Receipt For: Primary General Occupation President and Chief Executive Officer Receipt For: Primary General Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 19256621 Amount of Each Receipt his Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt his Period Transaction ID: 19256621 Amount of Each Receipt his Period Transaction ID: 19256621 Amount of Each Receipt his Period Transaction ID: 19256621 Amount of Each Receipt his Period Transaction ID: 19256621 Amount of Each Receipt his Period Transaction ID: 19256621 Amount of Each Receipt his Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt his Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt his Period Date of Receipt Date of Receipt Transaction ID: 19256621 Amount of Each Receipt his Period Date of Receipt Date		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
City Denver CO 80211-5302 FEC ID number of contributing federal political committee. Name of Employer Exempla Healthcare, Inc. Receipt For: Primary General Other (specify) ▼ State Zip Code Longmont CO 80502-1659 City State Zip Code Longmont CO 80502-1659 City State Zip Code Longmont United Hospital Primary General Other (specify) ▼ State Zip Code Longmont United Hospital Primary General Other (specify) ▼ State Zip Code Longmont United Hospital Primary General Other (specify) ▼ State Zip Code Longmont United Hospital Primary General Other (specify) ▼ Denoral Other (specify) Tenoral Other (s	∠ A.	Mr. Robert W Ladenburger	e, Suite 100	0-D	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Exempla Healthcare, Inc. Receipt For: Primary General Other (specify) ▼				•	Transaction ID: 19255641
Receipt For:		FEC ID number of contributing		80211-5302	Amount of Each Receipt this Period 500.00
Mr. Mitchell C Carson Mailing Address P O Box 1659 City State Zip Code CO 80502-1659 FEC ID number of contributing federal political committee. Name of Employer Longmont United Hospital Primary General Other (specify) ▼ City State Zip Code CO 80502-1659 Ccupation President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ City State Zip Code Primary General Other (specify) ▼ Date of Receipt Transaction ID: 19255642 Amount of Each Receipt this Period 250.00 Date of Receipt Transaction ID: 19256621 Transaction ID: 19256621 Transaction ID: 19256621 Amount of Each Receipt this Period Transaction ID: 19256621 Amount of Each Receipt this Period Cc. Name of Employer Mississippi Baptist Medic- al Center Receipt For: Primary General Date of Receipt Transaction ID: 19256621 Amount of Each Receipt this Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt this Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt this Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt this Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt this Period Date of Receipt Transaction ID: 19256621 Amount of Each Receipt this Period Transaction ID: 19256621 Amount of Each Receipt this Period Transaction ID: 19256621 Amount of Each Receipt this Period Transaction ID: 19256621		Receipt For: Primary General	Presiden	at and Chief Executive Office e Year-to-Date ▼ 500.00	r
City State Zip Code CO 80502-1659 FEC ID number of contributing federal political committee. Name of Employer Longmont United Hospital Receipt For: Primary General Other (specify) ▼ CITY State Zip Code 80502-1659 Amount of Each Receipt this Period 250.00 President and Chief Executive Officer Aggregate Year-to-Date ▼ Primary General 250.00 Full Name (Last, First, Middle Initial) Mr. Gerald Cotton Mailing Address 501 Castlewood Blvd City State Zip Code 77 Transaction ID: 19256621 Brandon MS 39047-7327 FEC ID number of contributing federal political committee. Name of Employer Mississippi Baptist Medical Center Receipt For: Primary General Occupation Executive Vice President Receipt For: Primary General Foo 00	- В.	Mr. Mitchell C Carson			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Longmont United Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Gerald Cotton Mailing Address 501 Castlewood Blvd City State Zip Code Brandon FEC ID number of contributing federal political committee. Name of Employer Mississippi Baptist Medical Center Receipt For: Primary General Occupation C C Date of Receipt Transaction ID: 19256621 Amount of Each Receipt this Period Executive Vice President Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼		City	State	Zip Code	
President and Chief Executive Officer Receipt For:		FEC ID number of contributing		80502-1659	Amount of Each Receipt this Period 250.00
Receipt For: Primary General 250.00		Name of Employer Longmont United Hospital			r
Mr. Gerald Cotton Mailing Address 501 Castlewood Blvd City State Zip Code Brandon MS 39047-7327 FEC ID number of contributing federal political committee. Name of Employer Mississippi Baptist Medical Center Receipt For: Primary General Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Primary General		e Year-to-Date ▼	
Mailing Address 501 Castlewood Blvd City State Zip Code Brandon MS 39047-7327 FEC ID number of contributing federal political committee. Name of Employer Mississippi Baptist Medical Center Receipt For: Primary General State Zip Code Transaction ID: 19256621 Amount of Each Receipt this Period C 500.0	-).	,			Date of Receipt
Brandon MS 39047-7327 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Mississippi Baptist Medical Center Receipt For: Primary General Aggregate Year-to-Date ▼		Mailing Address 501 Castlewood Blvd			
FEC ID number of contributing federal political committee. Name of Employer Mississippi Baptist Medical Center Receipt For: Primary General C Occupation Executive Vice President Aggregate Year-to-Date ▼		•		•	
al Center Receipt For: Primary General Aggregate Year-to-Date FOO OO		FEC ID number of contributing		39047-7327	Amount of Each Receipt this Period 500.00
Primary General 500.00		al Center	Executiv	e Vice President	
		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		Date of Descipt
Mr. Charles L Denton Mailing Address 960 Avent Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19256636
Grenada	MS 38901-5230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Grenada Lake Medical Cent- er	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Claude W Harbarger	1	Date of Receipt
Mailing Address 969 Lakeland Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19256637
Jackson	MS 39216-4606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer St. Dominic-Jackson Memor- ial Hospital	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 285.00	
Full Name (Last, First, Middle Initial) Mr. Eddie L. Foster	1	Date of Receipt
Mailing Address 116 Woodgreen Cross	sing	0 7 1 2 2 0 1 1
City	State Zip Code	Transaction ID: 19256642
<u>Madison</u>	MS 39110-4522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43.00
Name of Employer Mississippi Hospital Asso- ciation	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 299.00	
SUBTOTAL of Receipts This Page (optional) .		578.00

EDULE A (FEC Form 3X) ZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
rmation copied from such Reports and Statements m mmercial purposes, other than using the name and a	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
E OF COMMITTEE (In Full) erican Hospital Association PAC		
Jame (Last, First, Middle Initial) erald D Wages		Date of Receipt
ng Address 830 South Gloster Street	7: 0 1	07 / 12 / 2011
State elo MS	Zip Code 38801-4934	Transaction ID: 19256644 Amount of Each Receipt this Period
ID number of contributing al political committee.		25.00
ces, inc	on ve Vice President te Year-to-Date ▼ 1025.00	
Name (Last, First, Middle Initial) suy Geller ng Address PO Box 351		Date of Receipt
		07 12 2011
State nolia MS	Zip Code 39652-0351	Transaction ID: 19256645 Amount of Each Receipt this Period
ID number of contributing al political committee.	00002 0001	237.50
e of Employer ham Memorial Hospital Adminis	on strator and Chief Executive Of	- fi
ipt For: Primary General Other (specify) ▼ Aggrega	te Year-to-Date ▼ 237.50	
Name (Last, First, Middle Initial) ichard G Hilton		Date of Receipt
ng Address P O Box 1506		07 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State kville MS	Zip Code 39760-1506	Transaction ID: 19256970
ID number of contributing al political committee.	35/00-1300	Amount of Each Receipt this Period 150.00
e of Employer Occupati Regional Medical Cent-Associa	on te Administrator and Chief Fin	na
	te Year-to-Date ▼ 250.00	
TAL of Receipts This Page (optional)		412.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 10 / (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		dess of any political committee to	SOIGH SOITH BUILDING TO THE SUCH COMMITTEES.
Full Name (Last, First, Middle Initial) Mr. Sam W Cameron			Date of Receipt
Mailing Address 116 Woodgreen Cro	ossing		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Madison	State MS	Zip Code 39110-4522	Transaction ID: 19256972 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03110-4022	50.00
Name of Employer Mississippi Hospital Association Receipt For: Primary General		t & Chief Executive Officer e Year-to-Date ▼	1
Other (specify) Full Name (Last, First, Middle Initial) Mr. Wallace Strickland	0 0	610.00	Date of Receipt
Mailing Address 1314 19th Avenue			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Meridian	State MS	Zip Code 39301-4116	Transaction ID: 19256976 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03301 4110	250.00
Name of Employer Rush Health Systems	Occupatio Presiden	n t and Chief Executive Office	-
Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William C Oliver			Date of Receipt
Mailing Address 6051 U S Highway	49		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Hattiesburg	State MS	Zip Code 39401-7200	Transaction ID: 19256977
FEC ID number of contributing federal political committee.	C	39401-7200	Amount of Each Receipt this Period 550.00
Name of Employer Forrest General Hospital	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional			850.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not name and address	be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Mr. Tim Colburn			Date of Receipt
	Mailing Address 600 North Pickaway St	treet		07 15 7 2011
	City <u>Circleville</u>	State OH	Zip Code 43113-1447	Transaction ID: 19257095 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	111111111	268.50
	Name of Employer Berger Health System	Occupation President an	d Chief Executive Office	 r
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 268.50	
– В.	Full Name (Last, First, Middle Initial) Mr. Melvin H Fahs			Date of Receipt
	Mailing Address 208 North Columbus S	Street		07 15 2011
	City Hicksville	State OH	Zip Code 43526-1250	Transaction ID: 19257353
	FEC ID number of contributing federal political committee.	C	45320-1230	Amount of Each Receipt this Period 250.00
	Name of Employer Community Memorial Hospit- al	Occupation Chief Execut	tive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
_ C.	Full Name (Last, First, Middle Initial) Ms. Cynthia Moore-Hardy	<u> </u>		Date of Receipt
	Mailing Address 7590 Auburn Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 19257734
	Painesville FEC ID number of contributing federal political committee.	OH C	44077-9176	Amount of Each Receipt this Period 500.00
	Name of Employer Lake Health	Occupation President an	d Chief Executive Office	 r
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1018.50
t	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 43 / 107 (check only one)
Γ	Any information copied from such Reports and St	tatements ma	Detailed Summary Page y not be sold or used by any perso	n for the purpose of soliciting contributions
k	or for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Δ. Α.	Full Name (Last, First, Middle Initial) Mr. Gary J Robinson			Date of Receipt
	Mailing Address 10 East Washington St	treet		07 15 2011
	City	State	Zip Code	Transaction ID: 19257735
	<u>Painesville</u>	OH	44077-3460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Lake Health	Occupatio Vice Pre	n sident Government and Com	munit
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Gary S. Collier			Date of Receipt
	Mailing Address 4160 Tallman Trail			07 15 2011
	City	State	Zip Code	Transaction ID: 19258140
	Dayton	OH	45430-1970	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Miami Valley Hospital	Occupatio Vice Pres		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Randall D Oostra			Date of Receipt
O .	Mailing Address 1801 Richards Road			07 15 2011
	City Toledo	State OH	Zip Code 43607-1037	Transaction ID: 19258460 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer ProMedica Health System	Occupation Presiden	n t and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
\ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠	Full Name (Last, First, Middle Initial) Dr. Roy G Chew		Date of Receipt
	Mailing Address 3535 Southern Bouleva		07 15 2011
	City Kettering	State Zip Code OH 45429-1221	Transaction ID: 19258486 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 49423 1221	300.00
	Name of Employer Kettering Medical Center	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Ms. Brenda Kuhn		Date of Receipt
	Mailing Address 9816 County Creek Wa	ay	07 15 2011
	City	State Zip Code	Transaction ID: 19258603
	Centerville FEC ID number of contributing federal political committee.	OH 45458-9244	Amount of Each Receipt this Period 250.00
	Name of Employer Kettering Medical Center- Network	Occupation Chief Nursing Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Fred M Manchur		Date of Receipt
	Mailing Address 3965 Southern Bouleva	ard	0 7 1 5 2 0 1 1
	City	State Zip Code	Transaction ID: 19258606
	Dayton	OH 45429-1229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Kettering Health Network	Occupation President and Chief Executive Officer	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	.	800.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	γ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Dr. Troy Turner			Date of Receipt
	Mailing Address 1811 Grand Portage To			07 15 2011
	City	State OH	Zip Code	Transaction ID: 19258686
	Xenia FEC ID number of contributing federal political committee.	С	45385-9594	Amount of Each Receipt this Period 250.00
	Name of Employer Grandview Medical Center	Occupation Medical [
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Ms. Myra L. Evans			Date of Receipt
	Mailing Address 16603 R Avenue			07 19 7 2011
	City	State	Zip Code	Transaction ID: 19260441
	<u>Tarkio</u>	MO	64491-9280	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Community Hospital-Fairfax	Occupation Chief Exe	n ecutive Officer	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		250.00	
-).	Full Name (Last, First, Middle Initial) Mr. Chad R. Austin			Date of Receipt
	Mailing Address 6518 SW 26th Court			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: 19260445
	Topeka	KS	66614-4305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		57.69
	Name of Employer Kansas Hospital Associati-	Occupation	n sident, Government Relation	e e
	on Receipt For:		Year-to-Date	100
	Primary General Other (specify) ▼	1.99.09410	215.38]
ſ	CURTOTAL of Deceipte This David (antique)	<u> </u>		557.69
-	SUBTOTAL of Receipts This Page (optional)		<u> </u>	
	TOTAL This Period (last page this line number	only)		

City State Zip Code KS 66215-2967 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For: Primary General Other (specify) ▼	GE 46 / 107
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Fred J. Lucky Mailing Address 14607 W 89 City Lenexa KS 66215-2967 FEC ID number of contributing federal political committee. Name of Employer (American Hospital Association) City State Zip Code Receipt For: Primary General Other (specify) ▼ Cupation Scr. VP. Health Economics Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code PA 18938-5760 FEC ID number of contributing federal political committee. C Name of Employer New Jersy Hospital Association Sr. VP. Health Economics Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Aggregate Year-to-Date ▼ Capation Scr. VP. Health Economics Aggregate Year-to-Date ▼ City State Zip Code Last, First, Middle Initial) Mr. Sean J. Hopkins Date of Receipt the Capation Scr. VP. Health Economics Aggregate Year-to-Date ▼ City State Zip Code Last, First, Middle Initial) Mr. Sean J. Hopkins City State Zip Code Last, First, Middle Initial) Mr. Sean J. Hopkins City State Zip Code Last, First, Middle Initial) Mr. Sean J. Hopkins Cocupation City State Zip Code Last, First, Middle Initial) Mr. Sean J. Hopkins Cocupation Cocupation City City State Zip Code Last, First, Middle Initial) Mr. Sean J. Hopkins City State Zip Code Last, First, Middle Initial) Mr. Sean J. Hopkins Aggregate Year-to-Date ▼ Cocupation Vice President, Constituency Section Amount of Each Receipt the Security Mr. Security Section Amount of Each Receipt the Security Mr. Security Section Amount of Each Receipt the Security Mr. Security Section Amount of Each Receipt the Security Mr. Security Se	
Milling Address 14607 W 89 City State Zip Code KS 66215-2967 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Prill Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Name of Employer New Jersey Hospital Association Receipt For: Prill Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Name of Employer New Jersey Hospital Association Receipt For: Prill Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Name of Employer New Jersey Hospital Association Receipt For: Prill Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Date of Receipt Mailing Address 6180 Lower Mountain Road Date of Receipt Mailing Address 6180 Lower Mountain Road Date of Receipt Mailing Address 6180 Lower Mountain Road Date of Receipt Mailing Address 6180 Lower Mountain Road Date of Receipt Mailing Address 6180 Lower Mountain Road Date of Receipt Mailing Address 6180 Lower Mountain Road 18938-5760	
City State Zip Code KS 66215-2967 FEC ID number of contributing federal political committee. C Name of Employer Kansas Hospital Association Other (specify) ▼	
Lenexa KS 66215-2967 FEC ID number of contributing federal political committee. C	2011
FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code PA 18938-5760 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association. Receipt For: Primary General Other (specify) ▼ Cuther (specify) ▼ State Zip Code Transaction ID: 1926052 Amount of Each Receipt thing State New Jersey Hospital Association. Receipt For: Primary General Other (specify) ▼ Cuther (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 1926052 Amount of Each Receipt thing State New Jersey Hospital Association. Receipt For: Primary General Other (specify) ▼ Cuther (specify) The specify The spe	50
Name of Employer Receipt For: Aggregate Year-to-Date ▼	his Period
Receipt For:	115.38
Receipt For:	
Primary General Other (specify) ▼	
Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code New Hope PA 18938-5760 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ City State Zip Code Name (Last, First, Middle Initial) Ms. Eileen O'Keefe Mailing Address 172 Atteridge City State Zip Code Lake Forest IL 60045-1715 FEC ID number of contributing federal political committee. City State Zip Code Lake Forest IL 60045-1715 FEC ID number of contributing federal political committee. Name of Employer American Hospital Association Chicago Receipt For: Primary General Occupation Vice President, Constituency Section Aggregate Year-to-Date ▼ Capture Transaction ID: 1926065 Amount of Each Receipt thing federal political committee. Aggregate Year-to-Date ▼ Capture Transaction ID: 1926065 Amount of Each Receipt thing federal political committee. Aggregate Year-to-Date ▼	
Mailing Address 6180 Lower Mountain Road City State Zip Code New Hope PA 18938-5760 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ City State Zip Code Mailing Address 172 Atteridge Pate of Receipt Transaction ID: 1926052 Amount of Each Receipt thin Pate of Receipt Pa	
City State Zip Code New Hope PA 18938-5760 FEC ID number of contributing federal political committee. C Name of Employer New Jersey Hospital Association Occupation Sr. VP., Health Economics Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Mailing Address 172 Atteridge Date of Receipt City State Zip Code Lake Forest IL 60045-1715 FEC ID number of contributing federal political committee. C Name of Employer American Hospital Association-Chicago Occupation Vice President, Constituency Section Receipt For: Aggregate Year-to-Date Transaction ID: 192605 Primary General General Transaction ID: 1926065	2011
New Hope PA 18938-5760 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ City State Zip Code IL 60045-1715 FEC ID number of contributing federal political committee. Name of Employer Amount of Each Receipt this part o	
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ City Lake Forest FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Name of Employer American Hospital Association-Chicago Receipt For: Primary General Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ Date of Receipt M M M / D D D / Y O D D / Y O D D D D D D D D D D D D D D D D D D	
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Patential Economites Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Mailing Address 172 Atteridge City Lake Forest FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Primary General Occupation Vice President, Constituency Section Aggregate Year-to-Date ▼ Occupation Vice President, Constituency Section Aggregate Year-to-Date ▼	25.42
Receipt For: Primary	
Ms. Eileen O'Keefe Mailing Address 172 Atteridge City State Zip Code Lake Forest IL 60045-1715 FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Primary General Date of Receipt Transaction ID: 1926065 Amount of Each Receipt thi	
City State Zip Code Lake Forest IL 60045-1715 FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Primary General O 7 0 1 Transaction ID: 1926065 Amount of Each Receipt thi	
City State Zip Code Transaction ID: 1926065 Lake Forest IL 60045-1715 FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Primary General State Zip Code Transaction ID: 1926065 Amount of Each Receipt thi	2011
FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Primary General C Occupation Vice President, Constituency Section Aggregate Year-to-Date ▼	
Name of Employer American Hospital Association-Chicago Receipt For: Primary General Occupation Vice President, Constituency Section Aggregate Year-to-Date F20.00	his Period
American Höspital Association-Chicago Receipt For: Primary General Vice President, Constituency Section Aggregate Year-to-Date F20.00	40.00
Receipt For: Primary Aggregate Year-to-Date F20 00	
F20 00 I	
Other (specify) ▼	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 107 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	η not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sean Barden Mailing Address 11422 Bluff's Ridge			Date of Receipt
Mailing Address 11422 Bluff's Ridge City	State	Zip Code	0 7 2 5 2 0 1 1 Transaction ID: 19265402
Spotsylvania	VA	22551-8915	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Mary Washington Healthcare	Occupation EVP/CFC		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Kevin Barr Mailing Address 2418 Crowncrest W	av		Date of Receipt
	07 25 2011		
City	State	Zip Code	Transaction ID: 19265403
Richmond	VA	23233-2518	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Bon Secours-Richmond Comm- unity Hospita		e Vice President	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
Primary General Other (specify) ▼		350.00	
Full Name (Last, First, Middle Initial) Ms. Peggy J. Braun			Date of Receipt
Mailing Address 3116 Yeates Lane			07 25 2011
City	State	Zip Code	Transaction ID: 19265404
Virginia Beach	VA	23452-6117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Sentara Virginia Beach Ge- neral Hospita		sident, Nurse Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
			1050.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 107 (check only one) X
Any information copied from su or for commercial purposes, of NAME OF COMMITTEE (I American Hospital Ass	her than using the name and a n Full)	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd Mr. Geoffrey Brown Mailing Address PO Box City Dunn Loring FEC ID number of contribut federal political committee. Name of Employer Inova Fair Oaks Hospital Receipt For:	State VA ting C Occupati Senior Aggrega	Zip Code 22027-0125 ion Vice President Information Sette Year-to-Date ▼	Date of Receipt 0 7 25 2011 Transaction ID: 19265405 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Midd Ms. Christine M. Candio, RN Mailing Address 5235 B	,	350.00	Date of Receipt
City Alexandria FEC ID number of contributederal political committee. Name of Employer Inova Alexandria Hospital Receipt For:	State VA ting C Occupati Chief E	Zip Code 22304-8647 ion xecutive Officer te Year-to-Date	Transaction ID: 19265406 Amount of Each Receipt this Period 350.00
Other (specify) Full Name (Last, First, Midd Mr. Paul Chidester	dle Initial)	350.00	Date of Receipt
City Virginia Beach FEC ID number of contributed rederal political committee. Name of Employer	State VA ting C Occupati	Zip Code 23452-4704	Transaction ID: 19265413 Amount of Each Receipt this Period 350.00
Chesapeake Regional Med al Center Receipt For:	Vice Pro	esident of Medical Affairs te Year-to-Date 350.00	
SUBTOTAL of Receipts This	Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 107 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Patrick L. Christiansen Mailing Address 8377 Pedigrue Ct City Gainesville FEC ID number of contributing federal political committee. Name of Employer Inova Health System Receipt For: Primary General Other (specify)	State Zip Code VA 20155-3240 C Occupation Vice President Aggregate Year-to-Date 350.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Jeffrey Delisi Mailing Address 1861 Amberwood Mar City Vienna FEC ID number of contributing federal political committee. Name of Employer Virginia Hospital Center - Arlington Receipt For: Primary General Other (specify)	Occupation Assistant Vice President Medical Affa Aggregate Year-to-Date	Date of Receipt M M / D D D / Y Y Y Y Y 0 7 25 2011 Transaction ID: 19265415 Amount of Each Receipt this Period 200.00
Full Name (Last, First, Middle Initial) Ms. Barbara J Doyle Mailing Address 2501 Parker's Lane City Alexandria FEC ID number of contributing federal political committee. Name of Employer Inova Mount Vernon Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 22306-3209 C Occupation Senior Vice President and Chief Execution Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 25 2011 Transaction ID: 19265416 Amount of Each Receipt this Period 350.00
SUBTOTAL of Receipts This Page (optional)		900.00

formation copied from such Reports and Scommercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Hospital Association PAC I Name (Last, First, Middle Initial) Eric Fletcher illing Address 11208 Knolls End y totsylvania C ID number of contributing eral political committee.	Statements may not be sold or used by any person e name and address of any political committee to s State Zip Code VA 22551-8920	Date of Receipt Date of Receipt
I Name (Last, First, Middle Initial) Eric Fletcher illing Address 11208 Knolls End y notsylvania C ID number of contributing	VA 22551-8920	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Eric Fletcher illing Address 11208 Knolls End votsylvania C ID number of contributing	VA 22551-8920	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
y ootsylvania C ID number of contributing	VA 22551-8920	07 25 2011 Transaction ID: 19265417 Amount of Each Receipt this Period
otsylvania C ID number of contributing	VA 22551-8920	Amount of Each Receipt this Period
C ID number of contributing		
		350.00
me of Employer ry Washington Healthcare	Occupation Senior VP Marketing and Communicat	ipns
ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
John Gaul		Date of Receipt
iling Address 8013 River Falls Dr		07 25 2011
	State Zip Code	Transaction ID: 19265425
tomac	MD 20854-3849	Amount of Each Receipt this Period
	C	350.00
me of Employer va Health System	Occupation Senior Vice President &General Couns	- Gel
ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
,		Date of Receipt
iling Address 5976 Burnside Landin	g Drive	07 25 2011
	State Zip Code	Transaction ID: 19265427
ırke	VA 22015-2522	Amount of Each Receipt this Period
	C	200.00
me of Employer va Health System	Occupation Vice President, Government Relations	
- ·	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
OTAL of Receipts This Page (optional)		900.00
	Other (specify) Il Name (Last, First, Middle Initial) John Gaul illing Address 8013 River Falls Dr y btomac C ID number of contributing leral political committee. me of Employer by Health System ceipt For: Primary General Other (specify) Il Name (Last, First, Middle Initial) Donald L. Harris illing Address 5976 Burnside Landing y urke C ID number of contributing leral political committee. me of Employer by Health System ceipt For: Primary General Other (specify) TOTAL of Receipts This Page (optional)	Senior VP Marketing and Communicat ceipt For: Primary

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Timothy S. Jennings	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mailing Address 4715 White Owl Cres	•	Date of Receipt 0 7
City	State Zip Code	Transaction ID: 19265428
Chespeake FEC ID number of contributing federal political committee.	VA 23321	Amount of Each Receipt this Period 350.00
Name of Employer Sentara Norfolk General Hospital Receipt For: Primary General Other (specify) ▼	Occupation Vice President Pharmacy Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. Howard P Kern Mailing Address 6015 Poplar Hall Driv	e	Date of Receipt 0 7 2 5 2 0 1 1
City	State Zip Code	Transaction ID: 19265429
Norfolk	VA 23502-3819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Healthcare	Occupation President Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Richard Magenheimer		Date of Receipt
Mailing Address 8110 Gatehouse Roa	d	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19265432
Falls Church FEC ID number of contributing federal political committee.	VA 22042-1210	Amount of Each Receipt this Period 350.00
Name of Employer Inova Health System	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 107 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	,	1
Mr. Michael Spine		Date of Receipt
Mailing Address 8580 Magellan Park	xway	07 25 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19265435
Richmond	VA 23227-1149	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bon Secours-Richmond Comm-	Occupation Senior Vice President	
unity Hospita Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Stephen M. Ahnen		Date of Receipt
Mailing Address 125 Airport Road		0 7 2 6 2 0 1 1
City	State Zip Code	Transaction ID: 19266079
Concord	NH 03301-7300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.28
Name of Employer New Hampshire Hospital As- sociation	Occupation President and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 708.52	
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan		Date of Receipt
Mailing Address 283 Gallopiny Hill R	doad	07 26 2011
City	State Zip Code	Transaction ID: 19266080
<u>Hopkinton</u>	NH 03229-3402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	29.00
Name of Employer New Hampshire Hospital As- sociation	Occupation V.P., Finance and Rural Hospitals	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 248.50	
SUBTOTAL of Receipts This Page (optional)	462.28

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 107 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. George H. Mantakos Mailing Address 1011 Boyce Avenue City	State	Zip Code	Date of Receipt 0 7 2 7 2 0 1 1 Transaction ID: 19270940
Ruxton FEC ID number of contributing federal political committee.	MD C	21204-3602	Amount of Each Receipt this Period 680.00
Name of Employer Johns Hopkins Bayview Medical Center Receipt For: Primary General Other (specify) ▼	Occupatio Board Tr Aggregate		
Full Name (Last, First, Middle Initial) Mr. Thomas R Mullen Mailing Address 301 St Paul Place	•		Date of Receipt M
City	State	Zip Code	Transaction ID: 19271311
Baltimore FEC ID number of contributing federal political committee.	C	21202-2102	Amount of Each Receipt this Period 238.00
Name of Employer Mercy Medical Center		t and Chief Executive Office	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 238.00	
Full Name (Last, First, Middle Initial) Mr. David Link	-		Date of Receipt
Mailing Address 2218 East St. Char	les Circle		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Sioux Falls	State SD	Zip Code 57103-5818	Transaction ID: 19273087
FEC ID number of contributing federal political committee.	C	3/103-3616	Amount of Each Receipt this Period 250.00
Name of Employer Sanford Health	Occupatio Executive	n e Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	(l		1168.00
TOTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 107 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	13 14 15 16 n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael R. Dunaway		Date of Receipt
Mailing Address 15081 Linden Lane		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y D D D / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19273147
Leawood	KS 66224-3412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Missouri Hospital Associa-	Occupation	7
tion	Senior VP, Field Operations	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Stanley F Hupfeld		Date of Receipt
Mailing Address 3030 Northwest Expres	ssway, Suite 1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19273152
Oklahoma City	OK 73112-5470	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer INTEGRIS Health	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jay Johnson		Date of Receipt
Mailing Address P O Box 2000		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 19273153
Duncan	OK 73534-2000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Duncan Regional Hospital	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1100.00

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,	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 55 / 107
	ITEMIZED RECEIPTS			(check only one)
	TI LIMIZED TIEGEIT 13		Detailed Summary Page	X 11a 11b 11c 12
Г				13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the $$	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Stanley D Tatum			Date of Receipt
	Mailing Address P O Box 232			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 19273155
	Enid	OK	73702-0232	Amount of Each Receipt this Period
		OIX.	73702 0232	Amount of Lacif neceipt this Feriod
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. Mary's Regional Medic-	Occupation		
	al Center		ecutive Officer	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		500.00	
- В.	Full Name (Last, First, Middle Initial) Mr. David D Whitaker			Date of Receipt
υ.	Mailing Address P O Box 1308			M M / D D / Y Y Y Y
		Ctata	7'a Cada	07 28 2011
	City	State OK	Zip Code	Transaction ID: 19273156
	Norman	UN	73070-1308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Norman Regional Health Sy- stem	Occupation Presiden	on It and Chief Executive Officer	
	Receipt For:		e Year-to-Date ▼	
	Primary General	7.99.094.0	1 1 1 1 1 1 1	1
	Other (specify) ▼		500.00	
с.	Full Name (Last, First, Middle Initial) Dr. Kersey Winfree, M.D.	l		Date of Receipt
	Mailing Address 1000 N. Lee Avenue Suite 3057			07 28 2011
	City	State	Zip Code	Transaction ID: 19273157
	Oklahoma City	OK	73102-1036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer SSM Health Care of Oklaho-	Occupation Chief Me	on edical Officer	
	ma Receipt For:		e Year-to-Date V	
	Primary General	, iggi cgall		1
	Other (specify) ▼	0 0	1000.00	
	SUBTOTAL of Receipts This Page (optional)			2000.00
I				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Richard W Petersen Mailing Address 120 Fickett Street City South Portland FEC ID number of contributing federal political committee. Name of Employer Maine Medical Center Receipt For: Primary General Other (specify)	State Zip Code ME 04106-6874 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt 0 7 2 5 2 0 1 1 Transaction ID: 19273162 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Stephen P Dexter Mailing Address 7 Stony Point City Charleston FEC ID number of contributing federal political committee. Name of Employer Thomas Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code WV 25314-1663 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M / 28 / 2011 Transaction ID: 19273174 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Kenneth W Leisher Mailing Address P O Box 429 City Salida FEC ID number of contributing federal political committee. Name of Employer Heart of the Rockies Regional Medical Receipt For: Primary General Other (specify)	State Zip Code CO 81201-0429 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 107 (check only one) X 11a 11b 11c 12
			13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Michael T Baxter			Date of Receipt
Mailing Address 400 West 16th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 19273216
Pueblo	CO	81003-2781	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Parkview Medical Center	Occupation Chief Exe	n ecutive Officer	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Mr. Michael J McBride			Date of Receipt
Mailing Address P O Box 1628			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 19273219
Grand Junction	CO	81502-1628	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer St. Mary's Hospital and Medical Center	Occupation President	n tand Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David Hamm			Date of Receipt
Mailing Address 200 Exempla Circle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 19273232
Lafayette	CO	80026-3370	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Exempla Good Samaritan Me- dical Center	Occupation President	n t and Chief Executive Office	r
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		250.00]
	l		1

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58/107 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA		arooo or ary pointed committee to	
Full Name (Last, First, Middle Initial) Mr. Douglas E Bentz			Date of Receipt
Mailing Address 100 Seneca Valley	Estates		07 29 2011
City Sissonville	State WV	Zip Code 25320-9781	Transaction ID: 19276851
FEC ID number of contributing federal political committee.	C	25520-9701	Amount of Each Receipt this Period 250.00
Name of Employer Roane General Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. George G Couch			Date of Receipt
Mailing Address 36 Floral Drive			07 29 2011
City Wheeling	State WV	Zip Code	Transaction ID: 19276854
FEC ID number of contributing federal political committee.	C	26003-5464	Amount of Each Receipt this Period 500.00
Name of Employer Ohio Valley Medical Center	Occupation Presiden	n t and Chief Executive Office	-
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. Richard L. Miller			Date of Receipt
Mailing Address #4 Stony Point Roa	ad		07 29 2011
City Charleston	State WV	Zip Code 25314-1670	Transaction ID: 19276930
FEC ID number of contributing federal political committee.	C	25514-1070	Amount of Each Receipt this Period 500.00
Name of Employer West Virginia Hospital As- sociation	Occupation Vice Pres	sident	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	I		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 107 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr Michael Karpf, MD Mailing Address 800 Rose Street			Date of Receipt
City	State	Zip Code	0 7 1 8 2 0 1 1 Transaction ID: 19277458
Lexington FEC ID number of contributing federal political committee.	C	40536-0001	Amount of Each Receipt this Period 250.00
Name of Employer UK HealthCare Receipt For:		n e Vice President Health Affai e Year-to-Date ▼	r
Primary General Other (specify) ▼	Aggregate	250.00	
Full Name (Last, First, Middle Initial) Mr. Mark J Neff Mailing Address 222 Medical Circle			Date of Receipt 0 7 1 8 2 0 1 1
City	State	Zip Code	Transaction ID: 19277465
<u>Morehead</u>	KY	40351-1179	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer St. Claire Regional Medic- al Center	_ ,	t and Chief Executive Officer	<u></u>
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Greg Kiser			Date of Receipt
Mailing Address P O Box 769			07 18 2011
City	State	Zip Code	Transaction ID: 19277468
Louisa	KY	41230-0769	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Three Rivers Medical Cent- er Receipt For:	-, '	n ecutive Officer e Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	250.00	
SUBTOTAL of Receipts This Page (optional)	1		1000.00

or for commercial purpo NAME OF COMMIT American Hospita Full Name (Last, First Mr. E Berton Whitaken Mailing Address 9 City Madisonville FEC ID number of control federal political commercial political commercial federal fe	ses, other than using the name at TEE (In Full) all Association PAC st, Middle Initial) r 00 Hospital Drive St K' contributing mittee. Center General General	and address of any political committee to	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First Mr. E Berton Whitaker Mailing Address 9 City Madisonville FEC ID number of confederal political commodification for Employer Regional Medical Confederal Medical Confederal For: Primary Other (specify) Full Name (Last, First Mr. Michael T Rust Mailing Address P City Louisville	al Association PAC st, Middle Initial) 00 Hospital Drive St K' contributing mittee. C Chi General Q C Chi	y 42431-1644 supation ef Executive Officer gregate Year-to-Date ▼ 500.00	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. E Berton Whitaker Mailing Address 9 City Madisonville FEC ID number of c federal political commodical Confederal Medical Confederal For: Primary Other (specify) Full Name (Last, First Mr. Michael T Rust Mailing Address P City Louisville	ontributing mittee. Cocc Chi General	y 42431-1644 supation ef Executive Officer gregate Year-to-Date ▼ 500.00	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Madisonville FEC ID number of c federal political commodified for the federal political commodified for the federal political commodified for the federal political commodified for federal political commodified for federal political for federal political for federal federal for federal feder	ontributing mittee. Cocc Chi General	y 42431-1644 supation ef Executive Officer gregate Year-to-Date ▼ 500.00	Transaction ID: 19277473 Amount of Each Receipt this Period
Madisonville FEC ID number of c federal political commod	ontributing mittee. Center General General	y 42431-1644 supation ef Executive Officer gregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period
Regional Medical Confederal political common Name of Employer Regional Medical Confederal Medical Confederal Medical Confederal Medical Confederal Primary Other (specify) Full Name (Last, First Mr. Michael T Rust Mailing Address Polity City Louisville	enter Occ Chi General Age	ef Executive Officer gregate Year-to-Date ▼ 500.00	
of Hopkins Cou Receipt For: Primary Other (specify) Full Name (Last, First Mr. Michael T Rust Mailing Address City Louisville	General Agg	ef Executive Officer gregate Year-to-Date ▼ 500.00	
Full Name (Last, First Mr. Michael T Rust Mailing Address P City Louisville	General) 🔻	500.00	
Mr. Michael T Rust Mailing Address P City Louisville	st, Middle Initial)		4
City Louisville			Date of Receipt
Louisville	O Box 436629		0 7 1 8 2 0 1 1
•		ate Zip Code	Transaction ID: 19277476
FEC ID number of c federal political comr		Y 40253-6629	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital A tion	cencia-	supation sident and Chief Executive Officer	.]
Receipt For: Primary Other (specify	General	gregate Year-to-Date ▼ 500.00	
Full Name (Last, Fire Ms. Nancy G. Rust	st, Middle Initial)		Date of Receipt
Mailing Address 9	37 Woodland Heights Drive		0 7 1 8 2 0 1 1
City Louisville	St K	ate Zip Code Y 40245-5219	Transaction ID: 19277490
FEC ID number of c federal political comr	ontributing		Amount of Each Receipt this Period 500.00
Name of Employer N/A		supation memaker	_
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receip	ts This Page (optional)	·····	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Chris Carle Mailing Address 4900 Houston Road City Florence FEC ID number of contributing federal political committee. Name of Employer St. Elizabeth Healthcare Florence Receipt For: Primary General Other (specify)	State Zip Code KY 41042-4824 C Occupation Senior Vice President and Chief Oper Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Joseph G Koch Mailing Address 9 Linville Drive City Paris FEC ID number of contributing federal political committee. Name of Employer Bourbon Community Hospital Receipt For: Primary General Other (specify)	State Zip Code KY 40361-2129 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Chip Peal Mailing Address 299 King's Daughters I City Frankfort FEC ID number of contributing federal political committee. Name of Employer Frankfort Regional Medical Center Receipt For: Primary General Other (specify)	Orive State Zip Code KY 40601-6514 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1250.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. John T Porter			Date of Receipt
	Mailing Address 3900 West Avera Drive	e, Suite 301		07 27 2011
	City	State	Zip Code	Transaction ID: 19317903
	Sioux Falls FEC ID number of contributing	SD	57108-5721	Amount of Each Receipt this Period 0.00
	federal political committee.	Occupation	n	
	Name of Employer Avera Health		n t and Chief Executive Office	er
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	[MEMO ITEM]
	Other (specify) ▼	0 0	250.00	Refund(s) on Schedule B Totaling \$250.00 This changes the YTD Total to \$25- 0.00
_ В.	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			0 7 3 1 2 0 1 1
	City	State	Zip Code	Transaction ID: PR1045726225368
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Washingt		ice President & General Cou	unse
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) Mr. David Schulke			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		07 31 2011
	City	State	Zip Code	Transaction ID: PR1057462125368
	Washington	DC	20004-2801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Washingt		arch Programs	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	•		240.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Sarah Berk		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700		07 31 Y Y Y Y Y
City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1082532725368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Senior Associate Director Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Barbara Jellen	1	Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	IW	07 31 2011
City	State Zip Code	Transaction ID: PR1113464225368
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 42.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Section Director, Constituency Section Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Lisa Allen		Date of Receipt
Mailing Address One North Franklin		0 7 3 1 2 0 1 1
City	State Zip Code	Transaction ID: PR1118928225368
Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Chief Human Res	sour
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		126.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
, C	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
	Mailing Address One North Franklin		07 31 2011
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1260472925368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Professional Practice, AON	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Elizabeth Baskett		Date of Receipt
	Mailing Address 325 Seventh Street, NV	V	0 7 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1332167425368
	Washington FEC ID number of contributing federal political committee.	DC 20004-2802	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Policy	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		07 31 2011
	City	State Zip Code	Transaction ID: PR1347703425368
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President Account Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional))	144.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)		
۸.	Mr. Jack A. Mackay		Date of Receipt
			07 / 31 / 2011
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347703625368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
_ 3.	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		07 31 7 2011
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347791025368
	FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Operations, AONE	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Sharon Allen		Date of Receipt
•	Mailing Address 155 North Wacker Driv	re	0 7 3 1 2 0 1 1
	City	State Zip Code	Transaction ID: PR1474886225368
	Chicago FEC ID number of contributing federal political committee.	IL 60606-1709	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Membership and Marketing Manager	- ASHHR
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		144.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
٠.	Full Name (Last, First, Middle Initial) Mr. Mark Colucci		Date of Receipt
	Mailing Address 1061 N Penny Ln		07 31 7 2011
	City <u>Palatine</u>	State Zip Code IL 60067-1821	Transaction ID: PR1475133725368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation National Director Sponsorship and Ur	nde
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake		Date of Receipt
	Mailing Address One North Franklin		07 31 YYYY 2011
	City	State Zip Code	Transaction ID: PR1492459925368
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	122.49
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Executive Director - ASHHI	T Ra
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	591.70	P/R Deduction (\$40.83 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Monica D Day		Date of Receipt
	Mailing Address 10224 Prince Place #2	05	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1516850625368
	Largo	MD 20774-1210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Political Affairs Coordinator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		224.49

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 107 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Elisa Arespacochaga			Date of Receipt
Mailing Address One North Franklin			07 31 7 2011
City	State	Zip Code	Transaction ID: PR1555656225368
Chicago	<u> </u>	60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer American Hospital Associa-	Occupation		
tion-Chicago .	Associate	Director, Constituency Sec	eti
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	210.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Clinton S. Manning			Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W		07 31 7 2011
City	State	Zip Code	Transaction ID: PR1555656525368
Washington	DC	20004-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer American Hospital Associa-	Occupation		
tion-Washingt	, '	ector Advocacy & Member C	iommu
Receipt For: Primary General	Aggregate	Year-to-Date ▼	B/B B 11 (044 00 B)
Other (specify)		210.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Kathy Poole	1		Date of Receipt
Mailing Address One North Franklin			M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: PR1589439925368
Chicago	IL	60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer American Hospital Associa- tion-Chicago	+ +	Governance Projects	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	210.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)	1		126.00

ľ	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 107 (check only one) X
	Any information copied from such Reports and Sir for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and address of any political committee to	o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Ms. Kimberly Baker Mailing Address One North Franklin		Date of Receipt
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1590809125368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Director Travel Meeting Services Aggregate Year-to-Date 210.00	P/R Deduction (\$14.00 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) Mr. Robert Kehoe Mailing Address One North Franklin		Date of Receipt 0 7 3 1 2 0 1 1
	City	State Zip Code	Transaction ID: PR1625368325368
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Associate Publisher Vertical Magazin Aggregate Year-to-Date 210.00	P/R Deduction (\$14.00 Bi-Weekly)
 :.	Full Name (Last, First, Middle Initial) Mr. Stephen Hines Mailing Address 155 North Wacker Driv	e	Date of Receipt
	City	State Zip Code	0 7 3 1 2 0 1 1 Transaction ID: PR1648726625368
	Chicago	IL 60606-1709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify)	Occupation VP, Research HRET Aggregate Year-to-Date 210.00	P/R Deduction (\$14.00 Bi-Weekly)
	SUBTOTAL of Receipts This Page (optional)		126.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for e	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 69 / 107 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and State or for commercial purposes, other than using the n	atements may not be	sold or used by any perso	13 14 15 16 1 on for the purpose of soliciting contributions esolicit contributions from such committee
NAME OF COMMITTEE (In Full) American Hospital Association PAC	aric and address or	ary political committee to	Solicit Contributions from Such Continues.
Full Name (Last, First, Middle Initial) Ms. Lisa Grabert			Date of Receipt
Mailing Address 325 Seventh Street, NW Suite 700	1		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	•	Code 004-2801	Transaction ID: PR1671258625368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		120.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General	Occupation Senior Associat Aggregate Year-to	e Director, Policy -Date ▼	
Other (specify)		600.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr Robert P. David			Date of Receipt
Mailing Address One North Franklin	Chata 7:a	Ondo	07 31 2011
City <u>Chicago</u>	•	Code 606-3436	Transaction ID: PR1677512425368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		120.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Execu	tive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Erik Rasmussen			Date of Receipt
Mailing Address 325 Seventh Street, NW Suite 700	1		07 31 7 2011
City Washington		Oode 004-2801	Transaction ID: PR1819487925368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		120.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Associat		
Primary General Other (specify) ▼	Aggregate Year-to	600.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)			360.00
TOTAL This Period (last page this line number of		-	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 107 (check only one) X 11a
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A	merican Hospital Association PAC			
	ull Name (Last, First, Middle Initial) s. Linda Fishman			Date of Receipt
_	ailing Address 325 Seventh Street, NV Suite 700			07 31 7 2011
Ci [·] W	ty /ashington	State DC	Zip Code 20004-2818	Transaction ID: PR327629125368 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	С		120.00
<u>tio</u>	ame of Employer merican Hospital Associa- on-Washingt	Occupation Senior Vi	n ice President, Public Policy	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 600.00	P/R Deduction (\$40.00 Bi- Weekly)
	ull Name (Last, First, Middle Initial) r. Michael P. McCue			Date of Receipt
Ma	ailing Address 122 N. Greenwood Ave	07 31 2011		
Ci	•	State	Zip Code	Transaction ID: PR327771625368
FE	ark Ridge EC ID number of contributing deral political committee.	C	60068-3227	Amount of Each Receipt this Period 60.00
Na Ar tio	ame of Employer merican Hospital Associa- on-Chicago	Occupation Associate	n e Director	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
	ull Name (Last, First, Middle Initial) s. Suzanne R. Sonik			Date of Receipt
Ma	ailing Address One North Franklin			07 31 YYYY 2011
Ci		State	Zip Code	Transaction ID: PR327777225368
FE	hicago EC ID number of contributing deral political committee.	C	60606-3436	Amount of Each Receipt this Period 42.00
Na Ar tio	ame of Employer merican Hospital Associa- on-Chicago	Occupation Director,	n Long-Term Care	
	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
SUB	TOTAL of Receipts This Page (optional)			222.00

Ϊ	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to s	of or the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenue		07 31 2011
	City	State Zip Code	Transaction ID: PR327777825368
	Oak Park	IL 60304-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	P/R Deduction (\$40.00 Bi- Weekly)
_ 3.	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
	Mailing Address 1003 Kimberly Place		07
	City	State Zip Code	Transaction ID: PR327801725368
	Great Falls	VA 22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	P/R Deduction (\$20.00 Bi- Weekly)
_ ;.	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		07
	City	State Zip Code	Transaction ID: PR327812025368
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Executive Officer, AONE & Sr. V	<u>i</u>
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D Dodustics (640.00 D)
	Other (specify) ▼	600.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		300.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for comm	tion copied from such Reports and S tercial purposes, other than using the DF COMMITTEE (In Full) an Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Nam	ne (Last, First, Middle Initial) H. Lewis			Date of Receipt
Mailing A	Address 6034 North 22nd Stree			07 31 2011
City Arlingto	on	State VA	Zip Code 22205-3408	Transaction ID: PR327831725368 Amount of Each Receipt this Period
FEC ID	number of contributing olitical committee.	C		60.00
tion-Wa Receipt Pr	For: mary General	, '	Executive Year-to-Date 300.00	P/R Deduction (\$20.00 Bi-
Full Nan	her (specify) ne (Last, First, Middle Initial) nt J. Donovan	0 0		Date of Receipt
Mailing A	Address One North Franklin Str	07 31 YYYY 2011		
City		State	Zip Code	Transaction ID: PR327846225368
	Onumber of contributing olitical committee.	C	60606	Amount of Each Receipt this Period 60.00
tion-Chi			sident, Meetings & Travel Se	erv
	For: imary General her (specify) ♥	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
	ne (Last, First, Middle Initial) n A. Pryga			Date of Receipt
Mailing A	Address 2401 Calvert Street, N Apt. 1008	W		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: PR327851925368
	ngton number of contributing olitical committee.	C	20008-2614	Amount of Each Receipt this Period 60.00
tion-Wa			Policy Development	
	For: imary General her (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTA	L of Receipts This Page (optional)	<u> </u>		180.00

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 107 (check only one) X 11a
or for com	mercial purposes, other than using the OF COMMITTEE (In Full)	atements man name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Amer	ican Hospital Association PAC			
Mr. Ma	nme (Last, First, Middle Initial) rk Seklecki			Date of Receipt
	Address 325 Seventh Street, NV Suite 700			07 31 7 2011
City Wash	ington	State DC	Zip Code 20004-2818	Transaction ID: PR327858025368 Amount of Each Receipt this Period
FEC II	O number of contributing political committee.	C	1 1 1 1 1 1 1	120.00
tion-W	of Employer an Hospital Associa- ashingt	Occupatio Vice Pres	n sident, Political Affairs	
	rt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
	ume (Last, First, Middle Initial) on F. Barry			Date of Receipt
Mailing	Address One North Franklin			07 31 YYYY 2011
City		State	Zip Code	Transaction ID: PR327877825368
Millis FEC II federal	number of contributing political committee.	C	60606-3436	Amount of Each Receipt this Period 120.00
tion-Cl		Occupatio Regional	n Executive	
	rt For: Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
	ume (Last, First, Middle Initial) orge F. Bergstrom			Date of Receipt
Mailing	Address 130 North Garland Cou #3002	ırt		07 31 Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: PR327895725368
	number of contributing political committee.	C	60602-4750	Amount of Each Receipt this Period 120.00
<u>tion-Cl</u>		Occupatio Vice Pres		
	rt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOT	AL of Receipts This Page (optional)			360.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Į.	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Eileen M. Collins Offner		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		07 31 7 2011
	City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR327906125368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Director Policy Development Aggregate Year-to-Date 210.00	P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Judy Williams		Date of Receipt
	Mailing Address One North Franklin St	reet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327918925368
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director Membership	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328132825368
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation President and Chief Executive Office	r
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		204.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 107 (check only one) X
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC	•	
Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
Mailing Address 204 7th Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City La Grange	State Zip Code IL 60525-6406	Transaction ID: PR328136925368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
Mailing Address One North Franklin Stre	et	0 7 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Chicago</u>	State Zip Code IL 60606	Transaction ID: PR328174925368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, SHSMD	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
Mailing Address 5545 North Wayne		07 31 YYYY 2011
City	State Zip Code IL 60640-1318	Transaction ID: PR328223825368
Chicago FEC ID number of contributing federal political committee.	IL 60640-1318	Amount of Each Receipt this Period 120.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)	>	282.00
TOTAL This Period (last page this line number or	nlv)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 107 (check only one) X 11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		07 31 2011
	City	State Zip Code	Transaction ID: PR328241425368
	Eagle FEC ID number of contributing	ID 83616-5369	Amount of Each Receipt this Period 60.00
	federal political committee.		
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack	I	Date of Receipt
	Mailing Address 3475 North Venice Str	reet	07 31 2011
	City	State Zip Code	Transaction ID: PR328260925368
	Arlington	VA 22207-4446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	07 31 2011
	City	State Zip Code	Transaction ID: PR328341825368
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Political Action & Grassroot	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	600.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ		<u> </u>	300.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
4	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina		Date of Receipt
	Mailing Address 200 Clover Hill Court		07 31 7 2011
	City Yardley	State Zip Code PA 19067-5736	Transaction ID: PR328511825368
	FEC ID number of contributing federal political committee.	PA 19067-5736	Amount of Each Receipt this Period 120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell		Date of Receipt
	Mailing Address 1501 N. Harrison Stree	et	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code	Transaction ID: PR328512025368
	Arlington	VA 22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President, Communication	ons
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. George Arges		Date of Receipt
	Mailing Address One North Franklin St.		07 / 0 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328641125368
	Chicago FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director, Health Data Manage	emen
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		240.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may no e name and addres	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke			Date of Receipt
	Mailing Address One North Franklin Av	/e.		07 31 Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60606	Transaction ID: PR328913325368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	-, '	CEO, AHA Solutions, Inc ear-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey			Date of Receipt
	Mailing Address One North Franklin St	reet		07 31 2011
	City	State	Zip Code	Transaction ID: PR329013425368
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Direct	tor	
	Receipt For:	Aggregate Ye	ear-to-Date 🔻	
	Primary General Other (specify) ▼	0 0 0	300.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. John R. Combes			Date of Receipt
	Mailing Address One North Franklin			0 7 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR329071325368
	Chicago	<u> L</u>	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		120.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	, '	Chief Operating Officer, (ear-to-Date ▼	C
	Primary General Other (specify) ▼	, iggregate re	600.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1		300.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 107 (check only one) X 11a
4	ny information copied from such Reports and St r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	07 31 2011
	City	State Zip Code	Transaction ID: PR329084425368
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Boulevar	rd South	07
	City	State Zip Code	Transaction ID: PR329215725368
	Nashville 550 ID 10 10 10 10 10 10 10 10 10 10 10 10 10	TN 37210-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa-	Occupation AHA Regional Executive	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
	Mailing Address One North Franklin Str	eet	07 31 YYYYY 2011
	City	State Zip Code	Transaction ID: PR329342625368
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President & CFO	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D Doduction (04.4.00 D)
	Other (specify)	210.00	P/R Deduction (\$14.00 Bi- Weekly)
Г	CURTOTAL of Descints This Desc (autional)		222.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris		Date of Receipt
	Mailing Address 1136 W. Farwell Ave.		07 31 7 2011
	City	State Zip Code	Transaction ID: PR329654225368
	Chicago FEC ID number of contributing	IL 60626-3861	Amount of Each Receipt this Period 42.00
	federal political committee.	Occupation	_
	Name of Employer American Hospital Associa- tion-Chicago	Executive Director, ASDVS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
•	Mailing Address One North Franklin		0 7 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330343325368
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt	<u>I</u>	Date of Receipt
	Mailing Address One North Franklin		0 7 3 1 Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330411625368
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	P/R Deduction (\$20.00 Bi- Weekly)
	OUDTOTAL (Describe This Description)	>	162.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persecutive name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron Mailing Address 325 Seventh Street, I	NW	Date of Receipt
Suite 700		07 31 2011
City	State Zip Code	Transaction ID: PR330465225368
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General	Occupation Deputy General Counsel Aggregate Year-to-Date ▼	D/D Dadustics (014.00 Bi
Other (specify) ▼	210.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
Mailing Address 4960 138th Circle W		07 / 31 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR330475425368
Apple Valley	MN 55124-9229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	120.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)		Date of Descript
Mr. Gene O'Dell Mailing Address One North Franklin		Date of Receipt 0 7
City	State Zip Code	Transaction ID: PR330547725368
<u>Chicago</u>	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Strategic Planning	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		222.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 107 (check only one) X
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
Mailing Address 172 Atteridge		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR330549225368
Lake Forest	IL 60045-1715	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa-	Occupation Vice President Constituency Section	
tion-Chicago ' Receipt For:	Vice President, Constituency Section Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$40.00 Bi-
Other (specify)	600.00	Weekly)
Full Name (Last, First, Middle Initial) Mr. Anthony Spohn		Date of Receipt
Mailing Address 3219 N. Oriole		07 31 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR331098325368
<u>Chicago</u>	IL 60634-3232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer American Hospital Associa-	Occupation Executive Director, Associate Member	ordh
tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
Mailing Address 1101 N. Kentucky St	reet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR331278825368
Arlington	VA 22205-3515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, State Issues Forum	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	P/R Deduction (\$14.00 Bi- Weekly)
		182.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
A C	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. <u>/</u>	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
	Mailing Address 26 West Glendale Av	Э.	07
	City <u>Alexandria</u>	State Zip Code VA 22301-2402	Transaction ID: PR331304225368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Association-Washingt Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Director Advocacy and Public Policy Aggregate Year-to-Date 600.00	P/R Deduction (\$40.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		07 31 7 2011
	City	State Zip Code	Transaction ID: PR331379125368
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Sr. Director Federal Relations & Pol Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer	1	Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	0 7 3 1 2 0 1 1
	City	State Zip Code	Transaction ID: PR331386925368
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Associate Director Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	P/R Deduction (\$14.00)
	SUBTOTAL of Receipts This Page (optional) .	1	204.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persole name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Woodin Dale		Date of Receipt
Mailing Address 800 W. Central Road		07 31 7 2011
City <u>Arlington Heights</u>	State Zip Code IL 60005-2349	Transaction ID: PR331481325368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASHE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
Mailing Address 521 Great Falls St.		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: PR331533225368
Falls Church	VA 22046-2613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR346168125368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		282.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Megan Cundari		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		07 31 2011
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR518031925368
	FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period 124.08
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Associate Director	
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 586.40	P/R Deduction (\$41.36 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Laura M. Werner		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	N	07 31 7 2011
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR560101525368
	FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Associate Director, Political Affairs	7
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson		Date of Receipt
	Mailing Address 325 Seventh Street, N	N	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR566280925368
	Washington FEC ID number of contributing federal political committee.	DC 20004-2802	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	<u> </u>	226.08

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 107 (check only one) X 11a
0	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	itatements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson			Date of Receipt
_	Mailing Address 606 S. Royal St.			07 31 7 2011
	City Alexandria	State VA	Zip Code 22314-4142	Transaction ID: PR766023725368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	22314-4142	60.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Director, F		
	Primary ☐ General Other (specify) ▼	0 0	300.00	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		07 31 2011
	City	State	Zip Code	Transaction ID: PR801366325368
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washingt	. '	sociate Director Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			07 31 2011
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR876637225368
	FEC ID number of contributing federal political committee.	C	20004-2010	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt		ident, Legislative Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			162.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 87 / 107 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be a	sold or used by any person any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Α.	Full Name (Last, First, Middle Initial) Ms. Jennifer Armstrong Gay				Date of Receipt
	Mailing Address 10702 Benning Way				07
	City	State	Zip	Code	Transaction ID: PR928186525368
	Spotsylvania	VA	22	551-4670	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Director		unication Strategies	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	-Date ▼ 210.00	P/R Deduction (\$14.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. David A. Strickland				Date of Receipt
	Mailing Address One N. Franklin Street				07 31 YYYYY
	City	State	Zip	Code	Transaction ID: PR939603925368
	Chicago	IL	600	606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1		42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Executive		tor Quality Center	
	Receipt For:	Aggregate	Year-to	-Date ▼	
	Primary General Other (specify) ▼			210.00	P/R Deduction (\$14.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	•	84.00
TOTAL This Period (last page this line number only)	•	61341.33

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 107 (check only one) 11a 11b 11c X 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal			Date of Receipt
	Mailing Address 1215 K Street Suite 800			07 18 7 2011
	City	State	Zip Code	Transaction ID: 19255623
	Sacramento	CA	95814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0237495	20000.00
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 145000.00	
- В.	Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC			Date of Receipt
	Mailing Address 5510 Research Park D PO Box 259038	rive		07 19 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 19260436
	Madison	WI	53725-9038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0422881	600.00
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 3700.00	

SUBTOTAL of Receipts This Page (optional)	•	20600.00
TOTAL This Period (last page this line number only)		20600.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 107 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y no	ot be sold or used by any perso ss of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Α.	Full Name (Last, First, Middle Initial) Citibank, F.S.B.				Date of Receipt
	Mailing Address 1400 G Street, NW				07 29 YYYY 2011
	City	State		Zip Code	Transaction ID: 19310985
	Washington	DC		20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	-		59.42
	Name of Employer	Occupatio	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Ye	ear-to-Date ▼ 524.92	Interest Earned
В.	Full Name (Last, First, Middle Initial) TD Bank				Date of Receipt
	Mailing Address 901 Seventh Street, NV	V			07 29 YYYY 2011
	City	State		Zip Code	Transaction ID: 19310986
	Washington	DC		20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1		196.19
	Name of Employer	Occupatio	n		
	Receipt For: Primary General Other (specify)	Aggregate	e Ye	ear-to-Date ▼	Interest Earned

SUBTOTAL of Receipts This Page (optional)	•	255.61
TOTAL This Period (last page this line number only)	<u> </u>	255.61

В.

SCHEDULE B (FEC Form 3X)	Llan a marrata a abadula(a)	\ F	OR LINE	E NUMBER	₹:		P	AGE	90 /	107
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the) [check on	<u> </u>				_		_
	Detailed Summary Page	-	21b 27	22 28a		23 28b	→ 24 28c	-	25 29	26 30b
Any Information copied from such Reports and State	 ments mav not be sold or use	d by an						 ontri		
or for commercial purposes, other than using the nan										
NAME OF COMMITTEE (In Full)										
American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Citizens For Tom Petri				Transa Date o			19250)474	1	
				M N	и /	D	D /	γ)	2 0 1 ·	Y
Mailing Address P.O. Box 270				0 7		1	2		201	
City Fond Du Lac	State Zip Code WI 54936			Amour	nt of	Each	Disburs	emer	nt this	Period
Purpose of Disbursement Contribution		o	11					10	00.00)
Candidate Name Rep. Thomas E. Petri		1	egory/ ype							
·	sement For: 2012 ✓ Primary General Other (specify) ▼	•		Contril	buti	on				
State: WI District: 06										
Full Name (Last, First, Middle Initial) Guthrie For Congress				Transa Date o			19250 ment)476	6	
Mailing Address PO Box 9639				0 ^M 7 N	И /	^D 1	^D /	Ý	0 1	1
City Bowling Green	State Zip Code KY 42102			Amour	nt of	Each	Disburse	emer	nt this	Period
Purpose of Disbursement Contribution		Ö	11	<u> </u>	_			10	00.00)
Candidate Name Rep. Brett Guthrie			egory/ ype							
	ement For: 2012 Primary General Other (specify)	•		Contril	butio	on				
Full Name (Last, First, Middle Initial) Jon Runyan For Congress				Transa Date o			19250 ment)478	3	
Mailing Address PO Box 225				0 ^M 7 ^N	/	^D 1	^D /	Ý	0 1	1
City Colonia	State Zip Code NJ 07067			Amour	nt of	Each	Disburs	emer	nt this	Period
Purpose of Disbursement Contribution		o	11	L.		•		10	00.00)
Candidate Name Rep. Jon Runyan			egory/ ype							
	ement For: 2012 Primary General Other (specify)	•		Contril	butio	on				
SUBTOTAL of Disbursements This Page (optional)			. •					30	00.00)
TOTAL This Period (last page this line number only	′)		. •							

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBER	₹:	F	PAGE 91	107
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		eck only 21b 27	22 28a	X 23 28b	24 280	25 29	26 30b
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n								
NAME OF COMMITTEE (In Full) American Hospital Association PAC	and dadress of any pointed		00 10 3011	olt contin	541011511	0111 0001	1 dominities	<u>, </u>
Full Name (Last, First, Middle Initial) A. Frelinghuysen For Congress				Date o	action ID f Disburs	ement		Y
Mailing Address 19 Cattano Avenue				0 ^M 7		2 /	ž 0 1	1
City Morristown	State Zip Code NJ 07960			Amour	nt of Each	Disburs	sement this	
Purpose of Disbursement Contribution Candidate Name		011			•		1000.0	IQ .
Rep. Rodney P. Frelinghuysen		Catego Type	-					
Senate President	rsement For: 2012 X Primary General Other (specify) ▼			Contri	bution			
State: NJ District: 11 Full Name (Last, First, Middle Initial)				Trans	action ID	. 1026	1272	
B. Friends Of Joe Heck				Date o	f Disburs			. Y
Mailing Address PO Box 750114				0 7		2	žož	1
City Las Vegas	State Zip Code NV 89136			Amour	nt of Each	Disburs	sement this	Period
Purpose of Disbursement Contribution		011					1000.0	0
Candidate Name Rep. Joe Heck		Catego Type	,					
Office Sought: X House Senate President State: NV District: 03	rsement For: 2012 X Primary General Other (specify) ▼			Contri	bution			
Full Name (Last, First, Middle Initial) Butterfield For Congress					action ID f Disburs		31390	
Mailing Address PO Box 2571				0 ^M 7	M / D 2	21 /	y žo i	1 Y
City Wilson	State Zip Code NC 27894			Amour	nt of Each	Disburs	sement this	
Purpose of Disbursement Contribution		011					1000.0	0
Candidate Name Rep. George K. Butterfield		Catego Type						
Office Sought: X House Disbute Senate President State: NC District: 01	rsement For: 2012 X Primary General Other (specify)			Contri	bution			
SUBTOTAL of Disbursements This Page (option	al)		•			•	3000.0	0
TOTAL This Period (last page this line number o			<u> </u>		•			

	Use separate schedule(s	(check on	ılv one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28 28a 28b 28c 29
Any Information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Coffman For Congress			Transaction ID: 19261405
			Date of Disbursement Date of Disbursement
Mailing Address 9249 South Broadw #200-501			
City Highlands Ranch	State Zip Code CO 80129		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Mike Coffman		Category/ Type	
Senate President	bursement For: 2012 X Primary General Other (specify) ▼		Contribution
State: CO District: 06			
Full Name (Last, First, Middle Initial) Sam Farr for Congress			Transaction ID: 19261407 Date of Disbursement
Mailing Address 1010 S Street			$\begin{bmatrix} M & M $
City Sacramento	State Zip Code CA 95814		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Sam Farr		Category/ Type	
Office Sought: X House Senate President State: CA District: 17	bursement For: 2012 X Primary General Other (specify)		Contribution
Full Name (Last, First, Middle Initial) Collins For Senate			Transaction ID: 19261408 Date of Disbursement
Mailing Address PO Box 1096			$\begin{bmatrix} M & M $
City Bangor	State Zip Code ME 04402		Amount of Each Disbursement this Perio
Purpose of Disbursement 2014 Contribution	<u> </u>	011	2000.00
Candidate Name Sen. Susan M. Collins		Category/ Type	
X Senate President	bursement For: 2012 X Primary General Other (specify)	1 "	2014 Contribution
State: ME District:			
			4000.00

		Use separate schedule	s)		OR LINE heck only		n.		l	FAG	E 93/	107
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,		21b 27	22 28a	Х	23 28b	ш.	24 28c	25 29	
	y Information copied from such Reports and Stat for commercial purposes, other than using the na											S
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC											
V	Full Name (Last, First, Middle Initial) Chris Coons For Delaware Mailing Address PO Box 9900						of D	isburs	ement)9 2 0 1 1	1 ^Y
	City Newark	State Zip Code DE 19714				Amou	ınt o	f Each	Disbu	urseme	ent this I	Period
	Purpose of Disbursement 2014 Contribution Candidate Name Mr. Christopher Coons		C	01 ate	gory/	L.	•			. 1	000.00)
	Office Sought: House Disbu X Senate President State: DE District:	xsement For: 2012 X Primary General Other (specify)	l			2014	Cor	ntribu	tion			
	Full Name (Last, First, Middle Initial) Freedom Fund Mailing Address 128 N. Columbus Stre	at .					of D	on ID:	_		26 2 0 1	1 Y
							_					
	City Alexandria Purpose of Disbursement 2011 Contribution	State Zip Code VA 22314		01	1	Amou	int o	reach	DISDU		ent this I	
	Candidate Name Freedom Fund Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)		ate Typ	gory/ pe	2011	Cor	ntribu	tion			
	Full Name (Last, First, Middle Initial) Portman For Senate Committee					Date	of D	on ID:	ement			
	Mailing Address 8331 Little Harbor Driv	е				0 ^M 7	М	[/] 2	21	Y.	ž 0 1 -	1 ^Y
	City Cincinnati	State Zip Code OH 45244				Amou	ınt o	f Each	Disbu		ent this I	
	Purpose of Disbursement 2016 Contribution			01	-		_	•		1	000.00)
	Candidate Name Sen. Rob Portman		C	ate Typ	gory/ pe							
	Office Sought: House Disbu X Senate President State: OH District:	rsement For: 2016 X Primary General Other (specify) ▼	I			2016	Cor	ntribu	tion			
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CHEDULE B (FE	-		rate schedule(s) category of the		R LINE	E NUMBEF ly one)	₹:	L	PAGE	94 /	107	_
TEMIZED DISBUR		Detailed S	Summary Page		21b 27	22 28a	X 23 28b	24 28	3c	25 29		26 30
ny Information copied from s r for commercial purposes, o											6	
NAME OF COMMITTEE American Hospital Ass	,											
Full Name (Last, First, Mic Becerra For Congress	,					Date o	action ID f Disburs	ement				
Mailing Address P.O.	Box 261060					0 ^M 7 ^N		2 1	Y	ž 0 1 1	l ^Y	
City Los Angeles		State CA	Zip Code 90026			Amour	nt of Each	Disbur	rseme	nt this I	Period	d
Purpose of Disbursement Contribution				01	1				20	00.00)	_
Candidate Name Rep. Xavier Becerra				Categ Typ								
<u></u> → **	nate esident	bursement For: X Primary Other (spe	2012 General cify)			Contril	oution					
Full Name (Last, First, Mic Committee To Re-Elec	,	zquez To Conç	gre				action ID f Disburs	-	6144	3		
Mailing Address 315	Inspiration Lane					0 7	/ D	2 1	Y	ž o ť 1	I	
City Gaithersburg		State MD	Zip Code 20878			Amour	nt of Each	Disbur	rseme	nt this f	Period	d
Purpose of Disbursement Contribution				01	1	L.			10	00.00)	_
Candidate Name Rep. Nydia M. Velazqi	uez			Categ Typ	•							
<u> </u>	nate esident	bursement For: X Primary Other (spe	2012 General cify)			Contril	oution					
Full Name (Last, First, Mic Jim Gerlach For Cong							action ID f Disburs		6144	4		
Mailing Address PO I	Box 87					0 ^M 7 N	/ D	2 1	Y	ž 0 1 1	l Y	
City Uwchland		State PA	Zip Code 19480			Amour	nt of Each	Disbur	rseme	nt this f	Period	d
Purpose of Disbursement Contribution				01	1	L.			10	00.00)	_
Candidate Name Rep. James W. Gerla	ch			Categ	ory/							
	nate esident	bursement For: X Primary Other (spe	2012 General cify)			Contril	oution					
SUBTOTAL of Disbursemer		onal)			<u> </u>				40	00.00)	=
							-					_

В.

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)			-	NE NUMBER: PAGE 95					95 /	107			
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page		F	(check o 21b 27		ne) 22 28a	Х	23 28b	F	24 28c		25 29	Н	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														s	
NAME OF COMMITTEE (In Full)	, a a a a a	50 0. a, po	-	_						-					
American Hospital Association PAC															
Full Name (Last, First, Middle Initial) Friends Of Mark Warner							Date		isburs	en				Y	
Mailing Address 201 North Union Street S	uite 300						0 7		/ D2	2 1		2	0 Ť	1	
City Alexandria	State VA	Zip Code 22314					Amou	ınt o	f Each	n D	Disburse	-	-		d
Purpose of Disbursement 2014 Contribution Candidate Name				_)11		L.	•				5	00.00)	
Sen. Mark Robert Warner					egory/ ype										
X Senate X President	ment For: Primary Other (spe	2014 General					2014	Cor	ntribu	ıtic	on				
State: VA District: Full Name (Last, First, Middle Initial)											10001	040			
Marcia Fudge For Congress							Date	of D	isburs	en				V	
Mailing Address 3729 Silsby Rd							0 ^M 7	М	/ D	2 1		Ž	0 Ť	1	
•	State OH	Zip Code 44118					Amou	ınt o	f Each	n D	Disburse	men	t this	Perio	d
Purpose of Disbursement Contribution			Г	()11		L.		-			10	00.00)	
Candidate Name Rep. Marcia L. Fudge					egory/ ype										
	ment For: Primary Other (spe	2012 General			<i>.</i> .		Contr	ibut	ion						
Full Name (Last, First, Middle Initial)											19261	614			
Bill Johnson for Congress Committee							М	of D	isburs			Y	Y	Υ	
Mailing Address 3755 Hunters Hill							0 7		2	2 1	1	2	0 1	1	
•	State OH	Zip Code 44514					Amou	ınt o	f Each	n D	Disburse	men	t this	Perio	d
Purpose of Disbursement Contribution			Г	()11		L.	_	_			10	00.00)	
Candidate Name Rep. Bill Johnson					egory/ ype										
9 1	ment For: Primary Other (spe	2012 General					Contr	ibut	ion						
Giate. Of 1 District. 00							_	_							_
SUBTOTAL of Disbursements This Page (optional) .	<u></u>				▶		<u> </u>					250	0.00)	\exists
TOTAL This Period (last page this line number only)					. •										

Transaction ID: 19261616 Date of Disbursement Office Sought:		Use separate schedule(s)		NUMBER: PAGE 96 / 107
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Marino For Congress Mailing Address PO Box 653 City Williamsport PA 17703 Purpose of Disbursement Contribution Candidate Name Rep. Thomas Marino Office Sought: X House Senate President State: PA District: 10 Full Name (Last, First, Middle Initial) Ben Cardin For Senate Mailing Address Po, Box 21093 City State Zip Code MD 21228 Purpose of Disbursement Catonsville MD 21228 Purpose of Disbursement Contribution Office Sought: X House Senate President State: MD District: Full Name (Last, First, Middle Initial) Ben Cardin Cardin Office Sought: X Primary General President State: MD District: Full Name (Last, First, Middle Initial) Gillibrand For Senate Mailing Address 236 Massachusetts Ave Suite 110 City Washington Office Sought: X House X Senate President State: MD District: Full Name (Last, First, Middle Initial) Gillibrand For Senate Mailing Address 236 Massachusetts Ave Suite 110 City Washington Office Sought: Y House X Senate President Other (specify) ▼ Contribution Category/ Type Contribution Contribution Category/ Type Contribution Contribution Category/ Type Contribution	TEMIZED DISBURSEMENTS	for each category of the	21b	22 X 23 24 25
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Senate President State: PA District: 10 Full Name (Last, First, Middle Initial) Ben Cardin For Senate Mailing Address P.O. Box 21093 City Catonsville MD 21228 Purpose of Disbursement Contribution Candidate Name Sen. Benjamin Cardin Office Sought: House President President Milling Address 236 Massachusetts Ave Suite 110 City State Zip Code MD 21228 Amount of Each Disbursement this Peric Category' Type Contribution Contribution Transaction ID: 19261703 Date of Disbursement Mo 7 M / P 2 D / Y 2 O Y Y 2	Rep. Thomas Marino	resement For 2012	0,	
Full Name (Last, First, Middle Initial) Ben Cardin For Senate Mailing Address P.O. Box 21093 City Cate MD District Full Name (Last, First, Middle Initial) State: MD District Full Name (Last, First, Middle Initial) City Washington Candidate Name Sen. Kirsten E. Gillibrand Contribution Candidate Name Sen. Kirsten E. Gillibrand Contribution Candidate Name Sen. Kirsten E. Gillibrand Candidate Name Sen. Kirsten E. Gillibrand Candidate Name Sen. Kirsten E. Gillibrand Cifice Sought: House Vashington Disbursement For: Category/ Type Contribution Transaction ID: 19261703 Date of Disbursement this Peric Category/ Type Contribution Candidate Name Sen. Kirsten E. Gillibrand City Category/ Type Contribution Candidate Name Sen. Kirsten E. Gillibrand Cifice Sought: House Vashington Candidate Name Sen. Kirsten E. Gillibrand Cifice Sought: House Vashington Candidate Name Sen. Kirsten E. Gillibrand Cifice Sought: House Vashington Candidate Name Sen. Kirsten E. Gillibrand Cifice Sought: Contribution Contribution Cifice Sought: Contribution Contribution Contribution Cifice Sought: Contribution Contribution Contribution Cifice Sought: Contribution Contribution Contribution Cifice Sought: Contribution Contribut	Senate President	X Primary General		Contribution
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	NAME OF COMMITTEE (In Full) American Hospital Association PAC																
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	Mailing Address 509 Madison Ave. Suite 1902							0 ^M 7	М	′	^D 1	2	/	Ž	0 1	1 Y	
	City New York	State NY	Zip Code 10022					Amou	int o	f Ea	ch	Dis	burse	-			od
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	Longhorn PAC							Date	of D	isbı	ırse	me				V	
	Mailing Address 228 S. Washington St. Suite B-20							0 ^M 7	М	Ĺ	^D 1	2	Ĺ	Ž	0 1	1 [*]	
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 ;.	Full Name (Last, First, Middle Initial) Pete Sessions For Congress							Trans	of D	-				9568	3		
	Mailing Address PO Box 823047							0 ^M 7	М	′	2	6		Ž	0 Ť	1 Y	
	City Dallas	State TX	Zip Code 75382					Amou	int o	f Ea	ach	Dis	burse	emen	t this	Peri	od
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NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Heartland Values PAC		Transaction ID: 19269572 Date of Disbursement
Mailing Address P.O. Box 505		0 7 1 2 6 7 2 0 1 1
City Sioux Falls	State Zip Code SD 57101	Amount of Each Disbursement this Period
Purpose of Disbursement 2011 Contribution Candidate Name	011 Category/	1000.00
Heartland Values PAC	Type bursement For:	
Senate President	Primary General Other (specify) ▼	2011 Contribution
State: District: Full Name (Last, First, Middle Initial) Olson For Congress Committee		Transaction ID: 19269581
Mailing Address PO Box 16381		Date of Disbursement O 7 D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sugar Land	State Zip Code TX 77496	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	011	1000.00
Candidate Name Rep. Pete Olson	Category/ Type	
Office Sought: X House Senate President State: TX District: 22	bursement For: 2012 X Primary General Other (specify)	Contribution
Full Name (Last, First, Middle Initial) Majority Committee PAC		Transaction ID: 19269970 Date of Disbursement
Mailing Address PO Box 10134		07
City Bakersfield	State Zip Code CA 93389	Amount of Each Disbursement this Period
Purpose of Disbursement 2011 Contribution	011	2500.00
Candidate Name Majority Committee PAC	Category/ Type	
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NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Bob Casey for Senate Committee			Transaction ID: 19270778 Date of Disbursement
Mailing Address 700 13th Street, NW Suite 600			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} 7 \end{smallmatrix} \begin{smallmatrix} M \\ \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} \begin{smallmatrix} G \\ G \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 0 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{bmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 0 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{bmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{smallmatrix}$
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
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Candidate Name Sen. Bob Casey	\	Category/	
<u> </u>	ement For: 2012	Туре	
X Senate X President	Primary General Other (specify)		Contribution
State: PA District:			
Full Name (Last, First, Middle Initial) Jackie Speier For Congress			Transaction ID: 19270835 Date of Disbursement
Mailing Address Post Office Box 112			07
City Burlingame	State Zip Code CA 94011		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	Γ	011	1000.00
Candidate Name Rep. Jackie Speier		Category/ Type	
Senate X President	ement For: 2012 Primary General Other (specify)		Contribution
State: CA District: 12			
Full Name (Last, First, Middle Initial) New York Jobs PAC			Transaction ID: 19270886 Date of Disbursement
Mailing Address P.O. Box 763			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 2 & 6 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Deer Park	State Zip Code NY 11729		Amount of Each Disbursement this Period
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NAME OF COMMITTEE (In F American Hospital Associ	,			
Full Name (Last, First, Middle Crowley For Congress	Initial)			Transaction ID: 19270925 Date of Disbursement
Mailing Address 84-56 G	rand Avenue			$\begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 6 \\ 2 & 6 \end{bmatrix} / \begin{bmatrix} y & y & 2 & 0 & 1 & 1 \\ y & 2 & 0 & 1 & 1 & 1 \end{bmatrix}$
City Elmhurst	State NY	Zip Code 11373		Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution			011	2000.00
Candidate Name Rep. Joseph Crowley			Category/ Type	
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Richard Hanna For Congi	· ·			Transaction ID: 19270965 Date of Disbursement
Mailing Address 2308 Ge	enesee Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Utica	State NY	Zip Code 13502		Amount of Each Disbursement this Peri
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Candidate Name Rep. Richard Hanna			Category/ Type	
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Full Name (Last, First, Middle Mark Critz For Congress				Transaction ID: 19270983 Date of Disbursement
Mailing Address 551 Mai	n Street Suite 120			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Johnstown	State PA	Zip Code 15901		Amount of Each Disbursement this Peri
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Candidate Name Rep. Mark Critz			Category/ Type	
Office Sought: X House Senate				Contribution
State: PA District: 12		•		
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Detailed Summary Page	CHEDULE B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(separate schedule)	(check onl	E NUMBER: PAGE 101 / 10'
r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Berman For Congress Mailing Address 6380 Wilshire Blvd. #1612 City State Zip Code CA 90048 Purpose of Disbursement Contribution Condidate Name Rep. Howard L. Berman Office Sought: X House Senate President State: CA District: 28 Full Name (Last, First, Middle Initial) King For Congress Mailing Address 116 N Main St. PO Box 400 City State Zip Code (Sagony/ Type) Contribution Transaction ID: 19304995 Date of Disbursement this Peric Category/ Type Contribution Transaction ID: 19304995 Date of Disbursement this Peric Category/ Type Contribution Transaction ID: 19304995 Date of Disbursement this Peric Category/ Type Contribution Candidate Name (Last, First, Middle Initial) King For Congress Mailing Address Senate President State: IA District: 05 Full Name (Last, First, Middle Initial) Mike Thompson For Congress Mailing Address 5429 Madison Avenue City State: IA District: 05 Full Name (Last, First, Middle Initial) Mike Thompson For Congress Mailing Address 5429 Madison Avenue City State: IA Disbursement Contribution Cardidate Name Rep. Michael Thompson Office Sought: X House Senate President State: IA Disbursement City State Zip Code CA 95841 Purpose of Disbursement Category/ Type Contribution		Detailed Summary Page	27	28a 28b 28c 29
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Senate President State: CA District: 28 Full Name (Last, First, Middle Initial) King For Congress Mailing Address 116 N Main St. PO Box 400 City State Zip Code Early IA 50535 Purpose of Disbursement Contribution Candidate Name Rep. Steve A. King Office Sought: X House President State: IA District: 05 Full Name (Last, First, Middle Initial) Mike Thompson For Congress Mailing Address 5429 Madison Avenue City State Zip Code Seneral Other (specify) ▼ Transaction ID: 19304995 Date of Disbursement this Peric Contribution Contribution Contribution Transaction ID: 19305000 Date of Disbursement this Peric Contribution Transaction ID: 19305000 Date of Disbursement this Peric Category/ Type Contribution Contribution Contribution Condidate Name Rep. State Zip Code Candidate Name Rep. Michael Thompson Condidate Name Rep. Michael Thompson Condidate Name Rep. Michael Thompson Condidate Name Rep. Michael Thompson Contribution Disbursement For: 2012 Category/ Type Contribution Condidate Name Rep. Michael Thompson Contribution Condidate Name Rep. Michael Thompson Office Sought: X House Senate Primary General Category/ Type Contribution Contribution Contribution Contribution Contribution				
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Mailing Address 116 N Main St. PO Box 400 City Early Purpose of Disbursement Contribution Candidate Name Rep. Steve A. King Full Name (Last, First, Middle Initial) Mike Thompson For Congress Mailing Address State State State State State Senate President State: IA District: 05 Full Name (Last, First, Middle Initial) Mike Thompson For Congress Mailing Address State City Sacramento Candidate Name Rep. Michael Thompson Candidate Name Rep. Michael Thompson Contribution Candidate Name Rep. Michael Thompson Office Sought: X Primary Caneral Disbursement Category/ Type Contribution Transaction ID: 19305000 Date of Disbursement Office Sought: Amount of Each Disbursement this Peric Contribution Amount of Each Disbursement Candidate Name Rep. Michael Thompson Contribution				Transaction ID: 10204005
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Rep. Steve A. King Office Sought: X House Senate President State: IA District: 05 Full Name (Last, First, Middle Initial) Mike Thompson For Congress Mailing Address 5429 Madison Avenue City Sacramento CA 95841 Purpose of Disbursement Contribution Candidate Name Rep. Michael Thompson Office Sought: X House Senate President Disbursement For: 2012 Amount of Each Disbursement this Period Category/Type Contribution Contribution Contribution Candidate Name Rep. Michael Thompson Office Sought: X House Senate President Disbursement For: 2012 Amount of Each Disbursement this Period Category/Type Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution			011	1000.00
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
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Mailing Address P.O. Box 4945			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
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Candidate Name Sen. Debbie Stabenow		Category/ Type	
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Marsha Blackburn For Congress Inc.			Transaction ID: 19305011 Date of Disbursement
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Full Name (Last, First, Middle Initial) Friends Of Bennie Thompson			Transaction ID: 19305015 Date of Disbursement
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City Bolton	State Zip Code MS 39041		Amount of Each Disbursement this Peri
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Candidate Name Rep. Bennie G. Thompson		Category/ Type	
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 ;.	Full Name (Last, First, Middle Initial) Paul Tonko For Congress					Date	e of		burs	en	nent	0530	9		
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\rangle	American Hospit	al Association P	AC															
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NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John T Porter Mailing Address 3900 West Avera Drive, S	uite 301	Transaction ID: 19311213 Date of Disbursement O 7
7	tate Zip Code SD 57108-5721	Amount of Each Disbursement this Period 250.00
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